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Clinical Testing

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Richard C. Reba, M.D. Principal Investigator

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BIO-MED, Inc. 4401 Hartwick College Park, Maryland 20740

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20. ABSTRACT (Cantinus as reverse and if it is the state of the state

From January 1983 to August 19, 1983 research was continued at BIO-MED, Inc. under contract DAMD17-75-C-5036 Phase I Clinical Studies: The Army Drug Development Program". Activities include Experiment # 21, WR 2HCl: Short Term Safety and Tolerance Study and Experiment # 22, The Effect of Low and High Caloric Diet upon the SGOT and SGPT of Normal Human Subjects.

#### SUMMARY

During this reporting period, BIO-MED, Inc. continued to design and implement Phase I clinical studies in support of the U.S. Army Drug Development Program.

Experiment \$21, WR 6026 2HCL: Short Term Dosage Safety and Tolerance Study: Single Oral Dose, Rising Dose Levels, was implemented and completed during the reporting period. The final clinical report is presented in this report. WR 6026, originally synthesized and tested as an antimalarial agent, was the first drug for the treatment of leishmaniasis to be proposed for clinical trials by the U.S. Army Drug Development Program. In this double-blind study of safety and tolerance, 1 mg to 60 mg of WR 6026 2HCL or a placebo was given to healthy, male volunteers in a single oral dose. The drug was well tolerated up to and including the 60 mg dose level. Abnormalities in laboratory blood tests of subjects were minimal or of doubtful significance. Methemoglobinemia was not detected.

Experiment #22, The Effect of Low and High Calorie Diets Upon the SGOT and SGPT of Normal Human Subjects was completed during the reporting period. Elevations in serum glutamic oxaloacetic transaminase (SGOT) and/or serum glutamic pyruvic transaminase (SGPT) had been observed in both placebo and drug recipients during the course of studies performed at BIO-MED, Inc. Because of the importance of the levels of these hepatic enzymes to Phase I clinical drug tests and because hyperphagia was suspected as a cause of SGOT and/or SGPT elevations, this study was implemented to determine if high caloric intake could be associated with elevations in SGOT or SGPT. In an approved crossover study of the effects of various high calorie diets upon the hepatic enzymes, 18 subjects were fed a basic balanced diet of 2500 calories supplemented with 2500 to 3500 carbohydrate calories given ad libitum for three days. On the fourth day, 10 of the 18 subjects had SGOT or SGPT elevations in the abnormal range. In the crossover leg of the study, subjects received only the basic balanced 2500 calorie diet. One subject had one borderline elevation of the SGOT (subject value 48, normal 47) in the low calorie period.

If these phenomena can be reproduced and clarified, the interpretation of all SGOT and SGT determinations may be affected. It is possible that a new avenue of investigation will be opened into the pathophysiology of liver damage.

During the reporting period, a protocol was developed for study of the pediculicide, ABATE. The protocol, "Phase I Safety and Tolerance Testing for the Pediculicide, ABATE: Cutaneous Toxicity and Sensitivity", is included in this report. It is the purpose of the study to provide an estimate of the prevalence of cutaneous toxicity and hypersensitivity as a result of the dermal application of ABATE.

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#### FOREWORD

Phase I clinical studies of drugs under development by the U.S. Army Research and Development Command (USAMRDC) were performed at the clinical facility of BIO-MED, Inc. under the terms of the contract DAMD17-75-C-5036. All protocols were jointly reviewed by BIO-MED, Inc. and the Division of Experimental Therapeutics of the Walter Reed Army Institute of Research, and approved by the Institutional Review Board of BIO-MED, Inc. and the Human Subjects Research Review Board, Office of the Surgeon General, Department of the Army prior to implementation at BIO-MED, Inc.

Special assurance for the conduct of these studies has been extended from the Headquarters of the USAMRDC to BIO-MED, Inc.

SOCIAL ECCEPTOR SECTION FOR SECTION OF THE SECTION

For the protection of human subjects the investigator(s) have adhered to policies of applicable Federal Law 45CFR46.

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# BIO - MED, Inc.

#### FINAL CLINICAL REPORT

#### EXPERIMENT NUMBER 21

TITLE:

WR 6026 2HCL: SHORT TERM DOSAGE

SAFETY AND TOLERANCE STUDY:

SINGLE ORAL DOSE, RISING DOSE LEVELS

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#### FINAL CLINICAL REPORT

#### EXPERIMENT NUMBER 21

WR 6026 2HCl: Short Term Dosage, Safety and Tolerance Study Single Oral Dose, Rising Dose Levels

#### **ABSTRACT**

Forty-four healthy subjects were given increasing single oral doses of WR 6026 2HCl or placebo (1 mg - 60 mg, 11 dose levels) in a double blind study of safety and tolerance. There were no physical abnormalities, symptoms or laboratory abnormalities that could be attributed to drug administration. WR 6026 2HCl was safe and well tolerated under the conditions of this experiment.

#### INTRODUCTION

WR 6026 2HC1 (WR6026) is a primaquine analog synthesized and tested for the treatment of vivax malaria during World War II. Other 8-aminoquinolines showed greater promise and the drug was not further developed as an antimalarial.

More recently, WR 6026 was found to be highly active in the antileishmanial drug screening program when it was found to effectively suppress the number of liver amastigotes of three-day infections with Leishmania donavani in hamsters. The drug has consistently shown significant suppression at 0.0508 mg/kg in divided oral doses administered twice daily for four days. This dose is 470 to 700 times less than the reference antimonial compound, meglumine antimoniate (Glucantime\*). WR 6026 also shows promising activity in the hamster model against laboratory strains of L. donavani which are relatively resistant to another pentavalent antimony, Pentostam\*.

Based on animal studies in rats and dogs, the toxicologic profile of this drug is similar to primaquine. Administration of 0.3 mg/kg/day to dogs for 28 days produced little toxicity except for a slight elevation in methemoglobin values in one of six dogs. Doses of 1 and 3 mg/kg/day produced numerous dose related abnormalities in hematology and clinical chemistry studies with diffuse histologic abnormalities of the erythropoetic and reticuloendothelial systems. These studies suggested that elevated methemoglobin values should be useful as an early indicator of drug toxicity.

In studies conducted during WW II, multiple doses of WR 6026 combined with quinine were administered (5 mg base every 4 hours for 14 days). Some subjects complained of gastric, shoulder, back, neck and inguinal pain. Anorexia, nausea, vomiting, diarrhea, headache and generalized weakness occurred less frequently.

This report presents the results of a single dose study of the safety and tolerance of WR 6026 2HCl in man administered in increasing doses from 1 mg to 60 mg.

#### METHODS AND MATERIALS

#### STUDY DESIGN:

A double blind, 2x2 rising dose level design was used. A dose ranging from 1 to 60 mg of WR 6026 or placebo was administered as a single oral dose to 44 subjects.

#### SUBJECT SELECTION:

Forty-four non-smoking qualified subjects between the ages of 18 and 35 years participated in the study. The subjects were recruited from the Washington, D.C. metropolitan area by newspaper advertisement.

Candidates for participation had a complete evaluation including medical history and physical examination, chest x-ray, electrocardiogram (12 Leads) and a urinalysis. Blood examinations included the following: a CBC with differential count, platelet count, RBC indices and reticulocyte count, serum concentrations of glucose, BUN, creatinine, sodium, potassium, chloride, carbon dioxide, uric acid, total calcium, protein, albumin, globulin, phosphorous, cholesterol, triglycerides, alkaline phosphatase, SGOT, and total bilirubin. Methemoglobin, G6PD haptoglobin concentrations were measured.

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Subjects were selected so that the risks of participation were slight and comparable for all subjects. Certain candidates were routinely excluded such as those with murmurs indicating organic heart disease or active lesions The presence of conditions which neither on chest x-ray. increased risk nor compromised the validity of the study did not result in exclusion from study. Laboratory values falling between 2 and 3 standard deviations from the mean were usually cause for rejection, but exceptions were made taking the other laboratory results, clinical findings and the purpose and design of the study into account. instance, marginal elevations of the hematocrit, hemoglobin and red blood count were not, in the absence of other positive findings, a cause for rejection. Deficiency of G6PD was cause for exclusion.

To eliminate a known cause of methemoglobinemia, only non-smokers (defined as individuals who did not smoke every day and who had not smoked tobacco regularly for the past 30 days) were eligible for this study.

Candidates were given a concise written explanation of the study protocol. The investigator held a group discussion at which time the candidates had the opportunity to ask

questions. Each candidate was interviewed in private and permitted to sign the informed consent form in the presence of the investigator and a witness, only after the investigator had determined that the individual was fully capable of rendering free and informed consent.

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#### PROCEDURES:

#### Drug administration:

The subjects were admitted to the controlled environment of the BIO-MED Clinical Research Facility at College Park, Maryland. Four subjects were tested at each dose level, two receiving drug 1 mg capsules (Control No. WRA-06-05182) or 5 mg capsules (Control No. WRA-07-05182) and the other two placebo (control No. WRA-08-05182). Assignments to the drug or placebo group were random through lottery with the sealed code available only for emergencies and end-of-study analysis. The test capsules were ingested in the presence of one of the investigators. For each group, the capsules were administered simultaneously.

#### Recording:

Individual records were maintained on each subject. The following data were recorded: vital signs, weight, laboratory test results, symptoms and pertinent physical findings. The following schematic depicts details of procedures and observations during the study period.

# STUDY PLAN SINGLE ORAL DOSE SAFETY AND TOLERANCE OF WR 6026

Study Day	0*	1*	2*	3	7	14
Dose		X				
Physical Exam	X		X			X
Interview	x	X	X	X	X	X
Vital Signs	X	X	X	X	X	X
ECG	X		X			X
Lab.Tests+	X		X	X	X	X

<sup>\*</sup>Controlled environment

<sup>+</sup>Laboratory tests listed on page 4 are repeated.

#### Adverse Reactions:

Signs and symptoms of possible drug intolerance were carefully noted and evaluated. Standard BIO-MED procedures for management of medical emergencies and study suspension were in effect during the study.

Final Evaluation of Subjects:

On the last day of the study for each subject, final physical examinations and laboratory evaluations were performed. Subjects with abnormal findings were monitored until findings had returned to normal.

The schedule for the rising dose level study is presented below:

SCHEDULE RISING DOSE LEVEL

Study Group	Dose	Subject #s	Date admitted to facility (1983)
1	lmq	583-586	1/11
2	5mg	<b>587-</b> 590	1/18
3	15mg	591-594	1/25
4	20mg	595-598	2/8
5	25 mg	599-602	3/1
6	30 mg	603-606	3/8
7	35mg	607-610	3/29
8	40 mg	611-614	4/5
9	45mg	615-618	4/26
10	50 mg	619-622	5/10
11	60mg	623-626	5/17

The subjects of each group were observed through the 7th day of the study for evidence of intolerance before the next dose level was initiated.

#### RESULTS

Forty-four subjects were enrolled in the study. There were eleven dose levels. All subjects were dosed as scheduled. One subject (591, a placebo recipient) failed to return for evaluation and testing on study day 7 (7s) and was lost to follow-up.

Observations made in the various categories of the individual clinical summaries were tabulated as follows:

SYMPTOMS: Symptoms were uncommon and occurred with nearly equal frequency in drug and placebo groups as follows:

#### SYMPTOMS

	Drug Gro	oup	Placebo Group							
DOSE	SUBJECT NO.	SYMPTOM(S)	SUBJECT NO.	T SYMPTOM(S)						
lmg	585	ls(*)-gassiness 2s-headache 3s-muscle pain	583	<pre>ls-Muscle cramps,    nausea 2s-stomach "cramps &amp;    and spasms"</pre>						
15mg			591	ls-Diarrhea						
25mg	600	ls-"not hungry"								
35mg	608	2s-"fatigue"								
40 mg	612	2s-"slight sore throat"								
45mg	616	2s-"stomach felt upset"	617	2s-four semi-formed stools.						
			618	2s-"appetite not up to par"						
60mg			626	ls-vomited a few oz. of yellowish fluid 10 min. after taking capsules.						

<sup>\*</sup>s-Study day (eg, ls is study day 1)

PHYSICAL FINDINGS: No abnormalities were found on physical examination in the drug or placebo groups during the study which could be attributed to study participation.

VITAL SIGNS: There were no significant abnormalities of the vital signs in either the drug or placebo groups.

LABORATORY DETERMINATIONS: Laboratory determinations were perfomed as scheduled except for: 1) Subject 591 who failed to return for sampling on 7s and 14s; 2) Group 11 had the samples scheduled for 14s drawn on 15s because of scheduling conflicts; 3) Subject 600 had the 7s sample obtained on 9s; and 4) Subject 608 had the 14s sample drawn on 15s. Subject 589 had a retic count of 2.3 on 14s; he returned on 4 Aug. when his retic. count was normal. Subject 622 had 1+ protein on 14s; he was unwilling to return for follow-up urinalysis.

In this study, each subject had blood obtained on study days 0, 2, 3, 7 and 14 for the scheduled array of laboratory tests. The detailed results of these tests are tabulated in the appendix. Each test result was judged to be high, low or normal according to whether it fell above, below or within the limits of the 95th percentile for that particular test as estimated from selected values from healthy subjects (appendices B, C and D).

In appendices B, C and D, the laboratory abnormalities are annotated (H=high, L=Low). The abnormal values are also recorded in the individual clinical summaries (appendix E).

Tables I and II show the number of subjects having at least one abnormally high or low laboratory value for the category of laboratory test listed after drug administration (tables of laboratory values in the appendix include pre-treatment values).

For each laboratory determination shown in Tables I and II, the Fisher's test statistic was calculated comparing the number of subjects with high or low values among the drug recipients with the corresponding numbers of subjects with abnormal values among the placebo recipients. The test statistic is shown if the P value is .05 or less.

NUMBERS OF SUBJECTS HAVING AT LEAST ONE ABNORMALITY
OF THE BIOCHEMICAL MEASUREMENTS SHOWN IN DRUG AND
PLACEBO STUDY GROUPS

TEST	DRUG			PLACEBO	)		FISHER'S	TEST*
# H:	igh #	Low	#	High	#	Low	HIGH	LOW
GLUCOSE	2	1		2		1	NS+	NS
BUN	2	0		1		1	NS	NS
CREATININE	1	3		0		5	NS	NS
SODIUM	3	3		2		3	NS	NS
POTASS.	1	7		0		8	NS	NS
CHLORIDE	1	2		1		3	NS	NS
CO2	8	C		7		0	NS	NS
URIC ACID	2	6		0		4	NS	NS
T.PROTEIN	1	4		0		1	NS	NS
GLOBULIN	6	2		0		0	.01	NS
CALCIUM	0	5		0		5	NS	NS
PHOS.	3	1		5		0	NS	NS
CHOL.	2	1		2		1	NS	NS
TRIGLY.	1	0		3		2	NS	NS
ALK.PHOS.	0	0		0		0	NS	NS
SGOT	2	1		0		2	ทร	NS
SGPT	3	0		3		1	NS	NS
LDH	0	3		0		4	NS	NS
T.BILI.	0	0 '		1		0	NS	NS

\* Plot 50, Statistics, Vol 1, Tektronix, Inc. 1975,p 2-30. As employed here, 2x2 contingency tables for high and low values are constructed, e.g., URIC ACID

		Totals	Fisher's Test
2	20	22	
0	22	22	. 24
2	42	44	
	# with High Abn.	# with High Abn. # without  2 20 0 22	2 20 22 0 22 22

	# with Low Abn.	# without	Totals	Fisher's Test
Drug Group	6	16	22	
Plac.Group	4	18	22	.36
Totals	10	34	44	

+NS: P>.05

NUMBER OF SUBJECTS WITH HIGH OR LOW ABNORMALITIES OF BLOOD COUNTS, METHEMOGLOBIN AND HAPTOGLOBIN

TEST		RUG	PLAC	EBO	FISHER'S TEST*			
;	# High	# Low	# High	# Low	High	Low		
HCT	3	2	2	2	NS+	NS		
HGB	1	2	0	1	NS	NS		
RBC	2	1	1	1	NS	NS		
WBC	0	6	2	2	NS	NS		
LYMPHS	6	0	8	1	NS	NS		
SEGS	0	4	1	5	NS	NS		
MONOS	0	0	2	0	NS	NS		
EOS	2	0	4	1	NS	NS		
MCV	2	1	1	0	NS	NS		
MCH	1	2	0	0	NS	NS		
MCHC	0	12	0	13	NS	NS		
PLATELETS	5 0	0	3	0	NS	NS		
RETIC.	4	0	1	0	NS	NS		
HAPTOGL.	2	٠ 0	2	1	NS	NS		
METHEMGL.	. 0	0	0	0	NS	NS		

<sup>\*</sup> as in Table I. +NS:P>0.05

#### **DISCUSSION**

Phase I clinical studies of WR6026 2HCl were undertaken to identify safety and tolerance factors with a single oral dose. It was originally planned to start at a dose of 1 mg per subject, to increase the dose to 5 mg and then add 5 mg per dose level up to 30 mg. Symptoms of intolerance had been seen when the drug had been given at 30 mg/day (in the WWII studies) and animal studies had suggested the possibility of methemoglobinemia. In this extended study, the dose was raised to 60 mg/subject without encountering signs or symptoms of intolerance of a degree that would preclude administration of this drug to a patient for the treatment of Leishmaniasis.

In view of earlier studies studies of this drug using human subjects, symptoms were surprisingly mild. Muscle pain, a prominent feature of earlier studies, was seen in only one subject and that at the 1 mg dose level. Gastrointestinal symptoms were more prominent in the placebo subjects than in those receiving drug. None of the symptoms seen in the subjects receiving drug was debilitating nor considered to be a contraindication to the use of the drug at the respective dose level.

Physical examinations and recorded vital signs showed no signs of clinical problems in these subjects during the study.

In the absence of definitive signs or symptoms of drug intolerance in this study, the laboratory studies become critical in assessing the relative risk of drug administration. Laboratory studies were considered as follows.

In studies of this type, the convention has evolved that in order to place a minimal number of subjects at risk, only four subjects are enrolled at each dose level. Of these four, two receive drug and two receive placebo. In the event of ambiguity or uncertainty of the results, the drug level may be repeated. In the absence of untoward reactions, four more subjects are employed for study of the next dose level. This general type of experimental design has over the past ten years been demonstrated safe for human subjects in the context of the drugs studied at the doses given, and this design has produced useful data leading to further study and successful drug development.

However, the design--in statistical terms--is not robust. The number of independent observations at each dose level is

so small that no meaningful statistical statement can be made about the "significance" of any observed outcome at any single dose level. If formal statistical procedures are to be employed then certain constraints are imposed on the treatment of the data. Only observations about individual subjects can be treated as independent observations. It must be emphasized that multiple observations of the same variable in a given subject (such as multiple determinations of blood glucose) are not independent of one another and contribute little or nothing to statistical power.

These considerations led us 1) to combine all observations as either "Drug" or "Placebo", regardless of dose level since individual dose levels have prohibitively small numbers of independent observations and 2) to express observations in terms of numbers of subjects with and without abnormalities and whether the abnormalities that occur are high or low in regard to each specific laboratory test.

For the purposes of this study, we have re-defined our criteria for laboratory abnormalities. Previously, we have defined abnormal values as those values falling more than two standard deviations from the mean (derived from BIO-MED data) for any particular laboratory determination. It is clear that many of the test results do not follow a Gaussian distribution. We have elected to use the percentile method for establishing laboratory norms, which does not depend upon any assumptions about the distribution of the data from any particular test.

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Using these criteria for characterization data "normal" or "abnormal", we can identify which individuals had abnormal laboratory tests (after administration of the drug) and whether these abnormalities were "high" or "low". Individuals with abnormal values may then be further classified according to whether they received drug or placebo. The differences in the occurrence of subjects with abnormalities in the drug and placebo groups may be compared statistically using Fisher's test for significant differences. This procedure was used with the laboratory data from this study. Outcomes and tests for the statistical significance of these results are shown in Tables I and II.

Of all the laboratory tests, only serum globulin was abnormally high in a significantly greater (p<.05) number of subjects receiving drug than in subjects receiving placebo (six receiving drug vs. none receiving placebo). Of the six subjects who received drug, three also had elevations of the

serving globulin before receiving the drug, thus casting doubt on the apparent drug effect. There was a trend toward lower white blood cell counts and higher reticulocyte counts in the drug recipients (Table II); the differences were not statistically significant, nor were they clinically significant in any individual case.

Blood specimens for ordinary laboratory measurements were also examined for methemoglobin. Methemoglobin was not detected in any subject over the course of the study. Positive controls used at the test facility assure us that clinically relevant levels of methemoglobin would have been detected.

Haptoglobin levels were measured assuming that with hemolysis, haptoglobin would combine with the resulting free hemoglobin and that complex would rapidly be removed from circulating blood by the liver, resulting in a lowered haptoglobin. Haptoglobin levels for all subjects over the course of the study are presented in appendix D. Abnormally low levels of haptoglobin were seen in only one subject, a placebo recipient.

In summary, the laboratory abnormalities seen were minimal or inconsistent or in the case of serum globulin, of doubtful significance. Nevertheless, in future clinical studies of this drug, subjects should be observed for changes in serum globulin. The white blood cell count and the reticulocyte count may also be carefully observed in future studies.

#### SUMMARY

placebo was given by mouth to 44 human 2HCl or a subjects in a 2x2 double blind, rising dose level study. Doses began at 1 mg, the study was stopped after dose of 60 mg. No clinically significant symptoms were seen in subjects receiving the drug and no abnormal physical findings abnormalities of the vital signs were seen. Laboratory studies showed no clear evidence of clinically significant drug effect. Abnormalities in serum globulin were seen in six subjects receiving the drug. Marginal elevations in the reticulocyte count and reductions in the white blood cell count suggest to us that these variables be closely This drug is well tolerated in monitored in future studies. single oral doses up to 60 mg/dose.

It is concluded that single oral doses of up to and including 60 mg of the preparation of WR 6026 2HCl provided for this experiment may safely be given to healthy individuals. Subjects with Glucose-6-phosphate dehydrogenase deficiency were not observed in this study, but this drug must be presumed unsuitable for use in such subjects. Tolerance and acceptability of the drug may reasonably be expected in clinical use.

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#### APPENDIX

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- A. Tables of Normal Laboratory Values
  B. Tables of Blood Chemistries
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  D. Table of Haptoglobin Values
  E. Individual Clinical Summaries

#### APPENDIX A

# NORMAL LABORATORY VALUES AS DEFINED BY THE PERCENTILE METHOD

#### CHEMISTRIES

VARIABLE	LOWER LIMITS		JPPER NORMAL*	UNITS
GLUCOSE	72.3	-	109.5	mg/dl
BUN	6.9	-	20.4	mg/dl
CREATININE	0.82	-	1.50	mg/dl
SODIUM	135.6	-	143.6	mEq/L
POTASSIUM	3.64	_	5.43	mEq/L
CHLORIDE	97.9	-	107.4	mEq/L
CARBON DIOX.	24.5	_	32.1	mEq/L
URIC ACID	3.84	_	7.76	mg/dl
CALCIUM	8.99	_	10.74	mg/dl
PHOSPHATE	2.44	_	4.97	mg/dl
CHOLESTEROL	123.8	-	227.8	mg/dl
TRIGLYCERIDES	31.2	-	268.6	mg/dl
SGOT	11.6	_	37.1	Ū/L
SGPT	5.1	-	45.2	U/L
BILIRUBIN TOTAL	0.17	_	1.29	mg/dl
ALKALINE PHOS.	37.8	_	129.4	Ŭ/L
LDH	116.4	_	244.2	U/L
TOT. PROTEIN	6.02	-	8.13	g/dl
GLOBULIN	1.88	_	3.36	g/dl

<sup>\*</sup>Derived from laboratory values of 200 normal subjects according to the method of Mainland +.

<sup>+</sup> Mainland, D., Clinical Chemistry, Vol. 17, No. 4, 1971, p. 267-274.

#### APPENDIX A (cont)

# NORMAL LABORATORY VALUES AS DEFINED BY THE PERCENTILE METHOD

#### HEMATOLOGY VALUES

VARIABLE	LOWE	<u>₹-</u> [	JPPER	UNITS
	LIMITS	0.5	NORMAL*	
HEMATOCRIT	39.58	-	50.64	Vol %
HEMOGLOBIN	13.38	-	17.49	GMŞ% 3
RED CELL COUNT	4.34	-	5.73	$10^{6}/\text{mm}^{3}$
MCV	80.47	-	99.12	CuMicr.
MCH	27.04	-	33.86	mngn
MCHC	32.57	-	35.46	\$Hgb 3
WHITE BLOOD CELI	LS 4.16	-	9.89	10 <sup>3</sup> /mm <sup>3</sup>
LYMPHOCYTES	18.64	-	46.74	<b>%WBC</b>
NEUTROPHILES	38.59	-	73.05	<b>%W</b> BC
MONOCYTES	1.36	-	12.08	WBC 3
PLATELETS	147.78	-	346.13	$10^{3}/\text{mm}^{3}$
EOSINIPHILES	0.70	-	7.74	<b>&amp;WBC</b>
RETICULOCYTES	0.28	-	1.92	<b>%</b> RBC
Haptoglobin	18.7	-	150.8	mg/dl

<sup>\*</sup>derived from laboratory values of 200 normal subjects according to the method of Mainland +.

<sup>+</sup> Ibid.

SUBJ	STUBY	<b>. 4</b> 55				_			URIC							TOTAL	WKA		TOTAL		DRUG
MQ	<b>BAN</b> (~			CREAT	NA.	K	CL	COS	ACIO	CA.	P04	CHOL	TRIG	SGOT	SGPT	BILI	PHOS	LDH	PROT	GL08	PLACE
583	- 6 0 2 3	85 94 96 85	13 11 13 14 18	1.1 1.1 0.9 1.2 1.3	137 140 138 139 140	3.9 4.8 4.1 4.8 4.0	98 99 103 101 100	29 31 28 31 29	6.8 5.7 6.2 6.4 7.0	10.2 10.3 9.6 10.2 9.8	3.8 5.4H 5.4H	227 202 1 188 2 214 204	79 71 83 82 60	38H 41H 28 34 37	25 30 27 27 34	1.2 1.0 0.5 0.7 1.1	69 61 63 60 58	231 193 148 176 167	8.2H 7.8 7.2 7.5 7.4	3.3 3.2 3.0 3.1 3.1	•
584	- 6 0 - 2 3 7	78 81 93 96 86 93	16 20 16 15 19	1.0 1.1 1.0 1.2 1.1	139 140 139 141 141	4.0 4.3 4.7 4.2 4.0 4.7	99 99 102 101 101 99	29 31 32 30 28 32	6.7 6.2 6.1 6.2 6.4 6.5	10.2 10.3 9.7 10.3 9.7 10.1	3.5 3.9 4.5 4.3 3.6 3.1	176 189 190 203 175 199	54 62 80 95 76 110	23 29 20 23 21 29	31 33 34 52H 33 39	0.7 0.8 0.5 0.7 0.5 0.8	77 75 78 78 83	199 174 134 145 189 174	7.6 7.2 6.8 7.3 6.9 7.1	2.3 2.2 2.2 2.3 2.1 2.3	ø
585	- 6 0 2 3 7 14	89 83 84 82 87 91	14 14 14 17 13	1.0 1.3 1.0 1.2 1.1	139 142 138 143 143	4.3 4.2 4.1 4.4 4.1	99 100 100 102 99 99	30 31 31 31 31 33	6.4 6.1 6.0 6.3 6.3 7.3	9.7 9.6 9.7 9.6 10.2 9.8	3.8 4.0 4.3 4.8 4.1 3.9	171 171 176 170 176 176	82 77 79 82 77	16 18 20 17 16 20	17 19 26 38 18	0.7 1.0 0.8 0.7 0.9 1.1	52 51 55 52 53 55	150 112L 118 129 147 146	7.3 6.9 7.0 7.0 7.4 7.1	2.4 2.3 2.4 2.4 2.5 2.5	1 4
586	- 6 0 2 3 7 14	97 93 100 98 87 99	18 11 14 15 13	1.0 1.1 0.9 1.1 1.1	138 139 142 144H	4.2 4.6 4.9 5.0 4.7	99 99 103 102 105 105	28 27 29 32 29 31	6.2 6.5 5.2 5.4 6.5	9.9 9.5 9.4 9.5 9.6 9.3	4.1 3.7 4.3 4.5 4.3 4.0	188 159 154 162 159 154	98 49 76 89 83 134	29 23 18 17 13 20	38 20 18 41 19	0.5 0.6 0.4 0.4 0.3	58 62 58 53 51 51	174 180 126 130 137 128	7.5 6.7 6.0L 6.2 6.2 6.0L	2.5 2.1 2.0 2.1 2.0	1 .
587	- 13 0 2 3 7 14	94 88 93 92 95	10 18 12 13 16	1.1 1.2 1.2 1.2 1.2 1.2	137 136 138 139 137 136	3.7 4.2 4.1 4.2 4.2 4.3	99 97L 99 98 99	29 28 29 31 30 29	6.0 6.0 4.8 5.5 6.2 6.9	9.9 9.4 9.5 9.6 9.8 9.4	4.5 5.1H 5.7H 4.6	142 128 124 126 138 138	42 44 91 78 58 29L	16 12 15 27 23 13	6 11 9 14 11	1.0 0.7 0.4 0.5 0.6 1.2	96 98 96 94 93	134 126 107L 121 133 101L	7.1 7.3	3.1 3.0 2.9 2.9 3.0 2.9	Þ
588	- 6 0 2 3 7 14	97 80 85 90 85 97	10 15 11 16 8 10	1.1 1.1 1.0 1.1 1.1	141 141 140 139 140 139	3.8 3.7 4.2 4.5 3.6L 3.9	108H 100 101 100 101	30 29 30 31 29 29	6.1 6.7 6.1 6.3 6.9		3.7 4.1 3.2 3.5 3.6 3.3	140 148 180 177 156 164	70 76 103 78 62 158	21 24 37 26 18	17 16 20 24 23 16	0.3 0.3 0.5 0.3 0.4 0.3	56 59 60 59 62 61	140 170 153 139 153 123	6.7 7.1 7.4 7.1 6.5 6.7	2.7 2.8 3.1 3.0 2.6 2.6	P
589	- 5 0 2 3 7 14	92 91 90 89 93	13 11 16 18 17	0.9 1.1 1.2 1.1 1.2	140 144H 145H	3.5L 3.8 3.6L 4.0 4.5 4.6	98	33H 30 28 32 30 31	7.1 6.6 5.7 6.3 8.1H 7.1	9.0 10.2 9.6 9.9 9.5 9.1	5.5H 5.5H 6.2H 4.9	196	124 113 169 231 85 103	17 16 20 37 32 17	18 18 24 34 42 22	0.4 0.4 0.3 0.4 0.4	58 60 58 57 61 62	136 171 160 165 183 154	6.9 7.6 7.0 7.5 7.0 7.0	2.6 2.8 2.6 3.0 2.6 2.4	5
590	- 6 0 2 3 7 14	91 91 98 99 82 112H	7 14 9 14 9	1.1 1.0 0.9 1.0 0.9	140 138 140 139	3.7 4.2 4.2 4.6 3.6L 4.2	98 98 99	30		9.6 9.3	4.1 3.9 4.3	228H 230H 219 235H	69 60 57 50 40 51	17 11L 15 19 21	12 11 13 16 22 14	0.9 0.8 0.5 0.4 0.8	75 66 65 71 73 72	131 137 134 145 154 121	7.5 7.0 6.9 6.7 6.9 6.5	2.9 2.5 2.6 2.5 2.6 2.2	5 (
591	- 20 0 2 3	90 87 99 91	11 13 11 16	0.9 1.0 1.0 0.9	142 142	4.3 4.5 4.2 4.0	105	29 29 29 29	10.5H 5.9	10.5 9.5 9.4 10.0	3.1 4.8	140 140	104 85 63 105	18 22 14 18	28 21 19 15	0.7 0.6 0.3 0.4	109 105 99 113	192 151 128 150	7.7 6.7 6.5 7.1	2.5 2.3 2.1 2.2	Þ
592	- 20 0 2 3 7 14	89 88 95 90 94	12 13 10 15 11	0.9 1.1 1.1 1.0 1.0	139 135L 141	3.9 3.5L 4.3 4.0	100 961 100 102 98 99		4.1 5.4 3.9 4.5 4.6 4.7	10.0	3.6 4.6		57 87 37 79 90	11L 21 23 15 15	7 22 34 11 19 20	0.3 0.6 0.5 0.4 0.7	67 76 112 58 69 74	140 140 121 119 121 126	6.9 7.6 7.9 6.9 7.3 7.1	2.2 2.7 3.5H 2.1 2.3 2.3	15

H - HIGH L - LOW

NO COOE ZOB J	STUDY	ernc	BLIN	CREAT	, NA	K	-cr \	CO2	URIC	CA	P04	CHOL	TRIG	SGOT	SSPT	TOTAL BILI	ALKA PHOS	LOH	TOTAL PROT	GT02	DRUG DOSE PLACEBO (I
593	- 6 0 2 3 7 14	101 83 101 102 90 93	12 11 11 18 10	1.0 1.0 1.1 1.1 1.1	138 140 139 141 138 139	4.6 4.8 4.2 4.7 4.7	103 102 103 103 102 103	27 29 29 29 28 27	5.4 6.3 4.7 4.9 5.8 5.7	9.0 9.5 9.3 10.0 9.1 9.6	3.2 3.1 3.9 4.3 2.8 2.6	189 206 219 232H 205 214	46 66 123 128 45 122	23 26 20 24 19 18	25 23 24 10 21 22	0.3 0.4 0.4 0.4 0.8 0.7	66 54 65 75 70 68	209 183 154 159 161 176	6.7 7.0 7.0 7.1 6.9 6.9	2.5 2.5 2.6 2.5 2.4 2.4	•
594	- 6 0 2 3 7 14	84 97 89 94 98 90	11 9 12 10 10	1.0 1.0 1.0 1.1 1.1	137 139 140 138 136 139	3.9 4.3 4.3 4.1 4.1 3.6	99 102 101 98 98 100	27 30 32 31 29 28	4.9 4.5 4.0 4.1 4.8 4.4	9.4 9.6 9.3 10.1 9.3 9.7	3.7 3.3 4.5 4.2 3.9 4.7	186 166 167 181 175 161	38 43 68 41 33 35	22 22 14 26 22 24	32 27 17 31 29 26	0.7 0.8 0.3 0.6 1.2 0.5	98 110 59 104 104 114	167 117 123 117 116L 135	7.9 7.7 6.9 8.2H 7.9	3.5H 3.4H 2.2 3.6H 3.3 3.3	15 MG
595	- 13 0 2 3 7 14	96 107 98 95 88 94	13 13 14 11 14 19	1.1 1.1 1.0 1.0 1.1 0.8L		3.8 4.4 3.6L 3.8 3.8 3.9	101 104 105 105 105 100	30 31 29 29 28 30	6.3 3.7L 4.6 4.9 4.9 5.2	9.9 9.9 9.2 9.1 8.90	3.1 3.4 3.7 3.6 3.5 3.4	192 134 156 161 159 160	123 51 92 90 73 93	11L 18 15 21 16 33	16 24 20 26 20 48H	1.3M 0.3 0.4 0.3 0.4 0.8	71 75 64 59 70 62	170 139 137 136 153 159	8.0 7.2 6.9 6.9 6.8 7.1	3.1 2.7 2.7 2.6 2.6 2.7	P
596	- 6 0 2 3 7 14	92 111H 97 98 97 89	10 16 14 11 16 15	1.0 1.1 1.1 1.1 1.1 0.8L	143 141 144H 140 141 140	4.1 4.2 4.1 3.9 3.9 4.3	101 104 106 105 105 100	30 29 27 26 26 28	5.7 6.2 4.9 5.1 5.5 5.7	9.9 9.7 9.5 9.6 9.3 9.7	3.2 3.3 5.3H 4.2 3.4 3.8	171 145 147 145 144 149	80 106 93 81 72 58	14 17 12 15 16 19	17 15 11 15 13 18	0.6 1.1 0.5 0.5 0.6 0.5	73 71 69 64 69 78	139 141 133 126 146 140	7.2 6.8 6.7 6.9 6.8 6.8	2.4 2.1 2.2 2.2 2.2 2.3	P
597	- 6 0 2 3 7 14	92 95 101 105 95 85	11 17 13 10 12	1.2 1.3 1.3 1.4 1.1	140 139 140 138 139 139	4.2 4.2 3.9 4.0 4.0 4.3	101 103 104 100 102 99	30 28 29 27 29	5.0 5.1 4.7 5.2 6.3 5.4	9.6 9.5 9.4 9.5 9.7	3.6 3.6 5.1H 5.2H 4.3 3.7		92 118 102 113 87 106	13 14 16 17 22 22	29 27 34 39 47H 41	0.4 0.2 0.2 0.2 0.5 0.4	87 86 83 85 92 84	133 137 120 126 150 141	7.4 7.2 7.0 7.2 7.3 7.2	3.1 2.9 3.0 3.0 3.0 3.0	20 MG
598	- 6 0 2 3 7 14	90 87 90 94 80 92	13 16 18 15 15	1.0 0.9 1.0 0.9 1.1 0.8L	140 139 137 136 139 138	4.2 5.0 4.1 4.3 3.9 4.0	101 100 101 103 101 101	28 28 27 26 25 26	7.6 5.9 5.7 5.8 7.9H 7.4	9.8 10.1 9.8 9.6 9.6 9.4	4.5 4.7 5.0H 4.6 4.8 4.3	179 176 202 196 202 182	331H 178 387H 272H 147 302H	20 17 21 29 24 23	32 26 27 38 34 27	0.6 0.4 0.4 0.3 0.6 0.5	94 97 84 84 93	145 160 131 132 194 172	7.3 7.5 7.4 7.3 7.6 7.1	2.9 2.9 2.9 2.8 2.9 3.0	20 MG
599	- 12 0 2 3 7 14	75 82 97 92 60L 81	9 12 13 11 14 14	1.4 1.2 1.3 1.4 1.3	138 136 140 137 138 138	3.9 4.1 4.2 4.1 4.0 3.9	100 98 104 102 102 104	28 30 30 29 30 31	7.3 6.6 6.5 5.6 6.2 7.1	9.4 9.9 9.3	2.6 3.3 4.2 4.2 2.7 3.6	149 136 146 150 136 132	79 76 97 84 95 66	18 19 20 17 20 20	12 15 16 18 21	0.6 0.5 0.6 0.4 0.6	123 124 120 116 113 121	198 184 163 184 184 205	8.1 7.9 8.1 8.0 7.9 7.9	3.7H 3.5H 3.8H 3.7H 3.6H 3.7H	25 MG
600	- 6 0 2 3 9	84 82 91 92 90 95	14 14 11 12 12 13	1.1 1.1 1.3 1.0 0.9	142 148H 139 138	4.7 5.0 4.8 4.0 4.5 4.1	100 108H 104 101	29 30 29 29	5.7 4.9 3.9 4.0	9.4 10.3 10.2 9.2 9.4 9.9	4.1 4.7 4.9 3.6	143 148 142 154	45 49 54 47 68 99	37 22 21 12 14 18	28 24 21 20 10 27	0.4 0.6 0.9 0.5 0.5	61 76 68 66 67 73	175 212 158 143 168 160	7.1 7.8 7.3 7.0 7.3 7.4	2.7 2.9 2.8 2.7 2.9 2.8	25 MG
601	- 20 0 2 3 7 14	92 87 102 92 88 82	9 8 11 10 13	1.0 0.9 1.0 1.1 1.1	137 142 137 138		98 106 101 101	30 29 27		9.7	3.9	155   184   176   186	131 111 221 110 67 97	13 15 18 17 15 17	23 18 19 23 20 16	0.6 0.7 0.7 0.5 1.5H 0.9	79 75 90 84 77 81	128 151 127 137 132 152	7.3 6.6 7.0 7.0 6.9 7.0	2.6 2.4 2.6 2.6 2.5 2.5	P
602	- <b>6</b>	<b>8</b> 2 83	9	1.2	138 139	4.3 3.9	103 101	29 28	5.4 5.1	9.2 9.4	3.4 3.7	133 139	37 42	27 35	20 27	0.5 0.5	69 75	218 243	7.3 7.3	3.0 2.8	•

APPI	NDIX.	В							EXP		IT MU! ISTRIE	<b>GER</b> <i>21</i> S	l			•					Sep-83
SUBJ CODE HO	STUDY DAY	ernc	BUM	CREAT	MA	K	CL	CO2	URIC ACID	CA	P04	CHOL	TRIG	SGOT	SGPT	TOTAL BILI	ALKA PHOS	LDH	TOTAL PROT	GL05	DRUG DOSE 2 PLACEBO (U)
	2 3 7 14	81 89 81 89	10 9 16 10	1.1 1.3 1.1 1.0	141 137 138 139	3.9 3.9 3.6L 4.1	104 103 104 106	28 28 28 31	5.6 4.5 5.0 4.8	9.5 9.1 9.1 9.3	3.6 3.5 3.4 3.7	147 147 138 141	56 50 36 42	26 15 31 19	24 24 26 24	0.7 0.5 0.8 0.2	78 78 83 78	175 162 227 173	7.1 7.2 6.9 7.3	2.9 3.0 2.8 3.1	
603	- 6 0 2 3 7 14	88 83 101 91 98 90	15 18 21H 21H 21H 21H	1.2 1.4 1.6H 1.1 1.1	138 139 139 139 140 139	3.9 3.9 3.9 4.1 3.7 4.1	99 99 100 95L 104 100	31 29 30 33H 32 29	6.1 7.4 5.8 5.8 6.6 5.8	9.4 9.3 9.0 9.0 9.3 9.2	3.9 4.2 3.7 3.8 3.5 4.1	151 153 158 163 153 134	75 139 118 140 86 207	23 17 14 15 16 14	35 24 16 29 26 14	0.7 0.6 0.4 0.5 0.7	55 64 60 50 57 73	129 153 126 127 137 156	6.5 6.7 6.4 6.0L 6.5 6.3	1.8L 2.1 2.1 1.8L 2.0 2.0	30 MG
604	- 6 0 2 3 7	97 94 97 86 104 98	16 16 14 15 15	1.1 1.0 0.9 1.0 1.1	137 136 137 139 139	3.7 4.4	99 100 101 95L 103 99	30 29 30 33H 31 30	4.7 4.1 3.9 4.0 5.2 4.6	9.6 9.7 8.8L 9.4 9.3		140 140 133 139 131	67 47 51 60 63 67	18 24 15 13 25 12	21 28 13 24 30 18	0.5 0.7 0.4 0.4 0.6 0.4	78 82 80 72 82 83	123 159 141 144 157 146	7.5 7.2 6.9 6.9 7.5 7.5	2.7 2.7 2.7 2.5 2.9 3.1	<b>p</b>
605	- 27 0 2 3 7	77 80 84 84 84 85	17 14 11 13 16 15	1.0 1.1 1.3 1.1 1.3	145H 139 141 140 142 139	4.3 3.9 4.0 4.5 3.9 4.0	101 101 102 95L 104 102	33H 36H 32 34H 32 29	7.1 6.8 5.0 5.6 6.7 6.3	9.9 9.2 9.4 9.9 9.4 9.1	3.5 3.5 4.0 4.1 3.7 3.9	229H 139 164 174 163 155	201 121 257 158 112 121	25 21 20 26 21 11L	53H 31 35 60H 46H 27	0.6 0.6 0.4 0.5 0.7	47 57 56 52 61 54	151 175 169 168 173 148	6.9 6.3 6.4 6.3 6.4 6.2	2.0 2.0 2.1 1.9 2.0 2.1	30 MG
606	- 62 0 2 3 7	94 88 96 87 97 78	10 14 11 12 17	1.1 1.1 1.1 1.2 1.3	137 136 136 139 141 139	3.7 3.8 4.1 4.3 3.6L 3.8	99 100 98 94L 105 102	29 29 31 32 32 27	6.0 5.3 4.3 4.9 6.5 5.7	9.9 9.1 9.0 9.7 9.2 9.0	4.2 3.7 4.3 4.4 4.5 4.4	142 120L 121L 133 120L 124	42 38 53 50 25L 19L	16 16 14 11 19	6 13 8 14 19	1.0 0.7 0.6 0.7 0.6	96 86 86 84 93	134 112L 90L 121 129 123	7.9 6.5 6.8 6.9 7.1 6.6	3.1 2.5 2.8 2.6 2.8 2.7	35 MG /
607	- 6 0 2 3 7 14	89 72L 84 92 85 95	10 11 16 12 12	1.0 0.9 1.0 0.9 0.8L	136 138 135L 139 140 138	4.0 3.8 3.6L 3.9 3.8 3.9	101 100 99 105 103 101	30 30 28 27 31 31	5.9 4.8 5.0 4.5 6.3 4.9	9.5 9.4 8.8L 9.2 9.1 9.3	3.5 3.5 3.7 3.1 3.6 3.4	229H 214 217 220 197 241H	85 87 87 86 143 90	33 22 21 21 24 26	39 38 33 35 30 44	0.4 0.5 0.5 0.4 0.4	76 76 73 70 72 75	171 138 144 109L 154 142	7.7 7.4 7.1 7.2 7.2 7.5	3.4H 3.2 3.0 3.0 3.2 3.3	35 MG ,
608	- 48 0 2 3 7 15	92 97 92 90 89 95	9 12 12 9 12 14	1.0 1.1 1.0 1.0 1.0	140 139	3.8		30 28 26 31 30 30	5.2 5.2 4.3 4.2 5.4 5.0	9.4	3.8 4.4 4.4 4.5 3.3 4.3	162	131 76 111 128 85 74	13 17 12 19 18 15	23 20 11 16 11	0.6 0.6 0.3 0.4 1.2 0.6	79 90 85 86 82 94	128 151 139 138 151 108L	7.3 6.5 6.1 6.7 6.7	2.6 2.4 2.2 2.4 2.6 2.4	35 MG
50 <b>9</b> -	- 86 0 2 3 7	91	10 9 13 14 10	1.1 1.1 1.0 0.9 1.0	141 137 135L 142 141 136	4.3 4.5	108H 99 98 103 105 99	30 31 29 31 31	6.1 5.0 4.9 5.1 6.0 5.5	9.2		140 146 166 180 143	70 87 90 65 77 75	22 21 21 27 28 21	17 24 17 23 23 12	0.3 0.3 0.3 0.3 0.5 0.5	56 66 62 65 67 64	140 145 150 114L 148 145	6.7 6.8 6.9 7.5 6.8 6.9	2.7 2.8 2.8 2.9 2.9	p p
610	- 83 0 2 3 7	97 92 93 94	10 13 13 11 21H	1.2	137 138 133L 138 137 140	4.2 4.1 4.3 4.3	99 100 96L 99 102	29 30 31 33H 30 31	6.0 6.0 4.4 4.7 5.5 6.1	9.4 8.4L 9.4	4.5	129 125 134	42 64 78 52 78 57	16 8L 10L 17 16	6 11 4L 9 16 14	1.0 0.9 0.7 0.8 1.0	96 103 91 90 97 89	134 118 103L 71L 112L 98L	6.8 7.3	3.1 2.8 2.4 2.5 3.0 2.6	P
611	2		13 13 18 14 13	0.9 0.8L 1.0 1.1 1.0	139 139 145H 139	4.0 4.4 4.6 5.6H 3.9 4.2	101 100 99 102	32 32 33H 33H 32 33H	5.2 4.7 4.2 3.4L 4.8 5.3	9.8 9.2 9.5	4.4	143 167 183 175 135 137	54 95 143 101 96 77	16 24 19 16 22	17 26 25 27 34 16	0.4 0.6 0.3 0.3 0.4 0.2	92 111 103 95 100 103	125 167 133 117 154 130	6.7 5.8L 5.8L 5.8L	1.6L 2.2 1.7L 1.7L 1.8L 1.8L	40 MG

H - HIGH

L - LOW

SUB J COOE NO	STUDY	ernc ,	BUN	CREAT	NA	K	CL	COZ	URIC ACID	CA	P04	CHOL	TR 16	SGOT	SGPT	TOTAL BILI	ALKA PHOS	LDH	TOTAL PROT	GL08	DRUG DOSE PLACEBO (F
612	- 6 0 2 3 7 14	83 89 90 101 86 91	12 13 17 12 11	0.8L 0.8L 0.9 0.8L 0.9	141 147H 142	4.9	101 103 101 99 102 100	33H 33H 33H 33H 33H 32	5.0 4.6 4.3 3.3L 5.4 5.9	9.6 9.1 9.5	4.1 4.8 •.3h 5.0h 3.9 3.8	151 157	81 132 82 71 99 89	16 18 19 17 23 20	19 14 26 22 29 22	0.5 0.2 0.2 0.3 0.5	117 119 112 109 122 122	131 139 140 139 160 156	6.4 6.8 6.3 6.4 6.7	1.9 2.5 2.1 2.1 2.4 2.4	p
613	- 6 0 2 3 7 14	88 100 95 95 90 86	12 18 12 9 12 13	1.0 1.2 1.0 1.0 1.0	138 140 138 142 137 138	4.1 4.2 4.6 4.5 4.1 4.1	100 105 100 100 100	31 31 33H 30 31 30	6.1 6.8 4.6 3.6L 6.3 6.7	9.4 8.9L	3.9 4.1 4.2 4.4 3.6 3.9	167 175 174 179	48 73 172 114 71 67	17 18 20 18 23 20	11 8 14 17 23 10	0.8 0.8 0.3 0.4 0.7	80 69 69 67 70 77	169 170 171 161 153 179	6.9 6.5 6.5 6.6 6.8	2.7 2.8 2.6 2.5 2.7 2.7	P
614	- 6 0 2 3 7 14	86 91 89 95 89	10 9 12 9 8 13	1.0 0.9 0.8L 0.9 0.9	139 139 137 142 137 139	4.1 3.7 4.2 4.3 4.1 3.9	100 103 99 99 100 99	32 32 33H 31 32 31	3.4L 3.6L 3.8L 2.8L 3.9	9.7 9.4 9.7 9.4	3.7 3.7 4.9 4.4 4.0 4.1	186 188 203 185 178 196	74 71 131 87 96 80	18 21 22 18 16 17	27 35 35 32 30 24	0.9 1.0 0.7 0.8 0.9 1.0	65 65 66 61 67 74	154 149 143 144 149	7.3 7.8 7.4 7.2 7.2 7.7	3.0 3.6H 3.3 3.0 3.2 3.4H	40 MG
615	- 60 0 2 3 7 14	97 86 93 93 86 93	10 8 10 12 9	1.1 -1.0 1.1 1.3 1.1	140 139 140	3.8 4.1 4.3 4.2 3.4L 3.8		30 31 32 31 32 32	6.1 5.4 7.7 5.6 6.4 6.1	9.1 9.7 9.7 8.8L	3.7 2.6 3.0 3.7 2.4L 3.1	146 165 178 130	70 82 67 81 62 77	22 26 22 28 23 39H	17 13 20 28 21 18	0.3 0.2 0.5 0.4 0.3	56 57 66 73 64 61	140 113L 132 169 157 146	6.7 6.8 7.4 7.9 6.7	2.7 2.8 3.1 3.6H 2.8 2.9	45 MG
616	- 30 0 2 3 7 14	81 84 101 91 100 89	17 7 9 9 11 7	1.1 1.0 1.1 1.2 1.1	141 138 139 140 141 138	4.3 3.8 4.0 3.7 3.5L 3.7	98 101 101 100 104 98	34H 31 34H 34H 34H 34H	4.8 4.5 4.1 3.5L 5.3 5.1	8.9L 9.3 9.1 8.9L	3.6 3.6	138 146 154 158 142 149	51 51 50 71 45 40	22 21 16 20 36 24	22 16 19 34 24 26	0.4 0.2 0.3 0.3 0.4	67 67 65 66 60 66	144 128 133 170 195 174	6.4 6.1 6.5 6.5 6.0L	2.1 2.1 2.4 2.5 2.1 2.2	e5 MG
617	- 6 0 2 3 14	84 87 95 84 96	10 6L 7 8	0.9 0.9 0.9 1.1 0.9	139 141 142	4.3 4.4 3.9 3.7 4.1	961 103 105 107 102	32 32 33H 31 30		10.0 9.2 9.1 9.2 9.3	3.9 4.0 4.3	135 128 139	32 311 42 49 261	24 25 20 34 26	19 15 22 43 34	0.9 0.4 0.4 0.3 0.5	65 57 61 62 64	212 173 167 185 191	7.2 6.0L 6.2 6.3 6.7	2.6 2.2 2.5 2.6 2.7	P
618	- 6 0 2 3 7	82 84 88 93 58L 89	15 15 9 8 13	1.2 1.2 1.1 1.3 1.2	142 142 139 141 141	5.0 3.5L 4.0 3.9 3.9 3.9	102 104 108H		3.8L 3.3L 2.8L 4.8	10.4 9.7 9.4 9.6 9.9 9.4	3.4 4.3 4.0 3.5	174 171 161 166 162 180	46 52 79 85 40 110	20 26 16 18 29 21	11 6 9 20 14 23	0.5 0.4 0.3 0.3 0.5 0.2	67 79 71 76 74 73	150 148 135 153 229 156	7.4 7.3 6.9 7.0 7.3 6.7	2.5 2.5 2.6 2.7 2.4 2.4	P
619	- 6 0 2 3 7	85 89 96 92 86 91	11 10 9 12 12		139 141	4.0 4.3 4.2	101 104 103	31 31 33H 33H 31 30	6.0 6.4 5.2 4.7 6.0 6.1	9.4 9.3 9.2 9.1	3.9 3.2 4.8 4.7 3.7	160 149 146 143	34 29L 83 119 59	22 24 21 16 36 26	25 27 18 26 41 39	0.5 0.8 0.3 0.3 0.6 0.4	62 70 66 65 67 71	147 137 122 121 136 138	6.7 7.0 6.6 6.4 6.6 6.4	2.3 2.4 2.4 2.4 2.4 2.1	P
620	- 90 0 2 3 7	82 96 93 85 74	9 14 9 11 9	1.2 1.1 1.0 1.0 0.9	138 136 138 140	4.2	103 102 102 101 100 103	29 30 31 32 32 30	5.4 4.5 3.7L 3.9 4.8 5.1	9.3 9.3 9.2	3.4 3.5 3.8 4.0 3.3 3.7	151 147 148 145	37 54 88 84 62 76	27 22 22 19 35 20	20 20 16 16 31 22	0.5 0.4 0.3 0.3 0.6 0.3	69 89 87 84 88 77	218 158 145 145 169 169	7.3 7.2 6.8 7.1 7.2 7.0	3.0 3.0 2.9 3.1 3.1 2.9	50 MG
621	- 6	88 103 92 89	10 9 9	1.0 1.0 1.0	140 138	3.8 4.1 3.9	100 97L	33H 33H 33H	5.5 5.0 4.4	9.5 10.1 10.2	3.9 4.7	265H	91 112 173 276H	15 21 22 26	12 24 14 18	0.4 0.4 0.3 0.2	78 90 81 78	166 158 151 155	7.1 7.8 7.5 7.1	2.6 2.8 2.9 2.7	P

CODE NO	STUDY	ernc		CREAT	MA	K	CL	CO2	UR IC	CA	P04	CHOL	TRIG	SGOT	SGPT	TOTAL BILI	ALKA PHOS	LDH	TOTAL PROT	GL08	DRUG DO
	7 14	<b>89</b> 97	16 14	0.9 1.0	142 140	4.1 4.8	99 102	32 31	5.7 5.2	9.6 9.8	4.0 4.2	231H 251H	104 151	20 16	15 15	0.3 0.4	74 76	153 189	7.0 7.2	2.6 2.6	
622	- 6 0 2 3 7 14	86 97 102 92 94 96	11 12 8 11 7	1.1 1.1 1.1 0.8L 1.0 1.2	139 138 137 137 142 139	3.8 3.8 4.2 4.0 4.6 4.0	101 101 98 98 101 101	30 30 33H 33H 32 28	4.5 4.5 4.3 4.0 4.2 5.4	9.4 9.1 9.8 9.8 9.0 9.5	3.9 4.6 4.8 4.4 3.8 4.2	183 155 195 196 152 207	55 54 91 76 66 44	25 28 36 33 42H 28	36 36 38 41 46H 39	0.6 0.4 0.5 0.6 0.4	76 85 88 79 86 72	186 157 169 177 173 175	7.3 7.0 7.6 7.5 6.6 7.6	2.8 2.7 3.2 3.1 2.6 3.0	50 MG
623	- 13 0 2 3 7 15	85 84 109 110H 115H 92	10 10 13 16 17	1.3 1.2 1.3 1.5 1.4	141 140 141 139 139 140	4.0 4.6 4.0 4.2 4.4 4.1	103 99 105 107 103 101	31 32 30 32 31 31	5.1 5.5 4.8 4.7 5.1 5.9	9.3 9.6 9.2 9.4 9.2 9.5	3.4 3.4 4.2 3.8 3.6 3.3	145 143 146 149 146 146	46 66 44 55 41 147	19 2L 14 17 24 24	13 18 15 10 23 20	0.4 0.5 0.4 0.3 0.4	50 52 44 43 47 57	131 119 122 126 130 122	6.8 6.9 6.5 6.7 6.7	2.5 2.6 2.4 2.6 2.4 2.7	60 MG
624	- 6 0 2 3 7 14	95 92 95 96 94 96	20 18 14 20 24H 16	1.0 0.8L 1.0 1.1 0.9	139 140 039L 138 138	4.0 4.4 3.7 4.5 4.0 3.9	103 101 101 105 104 99	30 31 34H 32 29 32	4.7 4.0 3.8L 3.8L 3.6L 4.6	9.0 8.9L 9.3 9.2 9.0 9.5		127 125 142 135 131 122L	56 68 77 78 68 71	24 42H 22 22 22 32 24	34 42 33 29 45 32	0.6 0.4 0.6 0.4 0.4	71 67 60 65 70	218 172 176 167 199 197	7.5 6.8 7.3 7.3 7.0 8.0	3.3 2.8 3.0 3.1 2.8 3.5H	60 MG
625	- 6 0 2 3 7 15	102 106 113H 110H 77 113H	15 14 11 14 12 11	1.1 0.8L 1.0 1.1 1.0	139 142 140 137 140 141	3.8 4.6 4.1 3.8 3.7 4.3	109H 100 101 103 100 101	30 32 32 30 31 32	5.7 5.4 5.1 5.2 5.8 6.3	9.5 9.3 9.2 9.2 9.6	3.5 3.4 3.2 3.6 3.0 3.0	169 163 178 192 195 182	70 81 178 343H 136 131	11L 29 20 34 20 19	17 27 34 61H 71H 33	0.7 0.7 0.4 0.3 0.6 0.3	104 104 100 113 105 114	182 143 145 167 155 171	7.0 6.8 6.6 6.9 6.9	2.7 2.5 2.3 2.5 2.4 2.7	P
626	- 6 0 2 3 7 15	102 70L 83 113H 89 87	8 9 7 9 7	1.2 0.9 1.1 1.2 1.0	136 142 139 135L 139 140	3.8 4.4 3.8 4.2 3.5L 4.2	106 101 102 101 103 102	31 31 30 29 30 31	6.6 6.9 5.8 6.4 5.6 6.6	10.0 9.8 10.1 9.9 9.4 9.9	2.8 3.9 3.5 3.1 2.8 3.4	151 128 162 159 131 142	91 61 61 72 103 103	18 28 23 21 20 21	21 23 24 20 18 17	0.8 0.5 1.1 1.2 0.3 0.4	117 97 116 112 98 97	170 168 178 166 157 155	7.5 6.7 7.4 7.3 6.6 7.1	3-0 2.4 2.6 2.7 2.1 2.5	Þ

H -HIGH L - LOW

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APPENDIX C **MONTOLOGI** 

SUBJ			•													
0008	STUDE		. •-		•											
NO	DAY	HCT	1523	MIC	MCV	MCH	MOIC	MBC	LYPERIS	S <b>8G8</b>	MONOS	PLTS	ATL	ECS.IN	COMENTS	DRUG DOSE OR PLACEBO (P)
583																
	- 6	48.3	15.5	5.4	89.4	28.7 29.2	32.1 <u>1</u> 32.8	4.7	44 49H	44 41	9	256 279	0	2 2	Retic 1.0	P
	0 2	44.5 43.7	14.6	5.0 4.9	89.0 89.2	29.2	32.7	5.3	51H	38L	ź	278	Ö	3	Retic 0.7 Retic 0.9	
	3	46.6	15.2	5.3	87.9	28.7	32.6	5.5	49H	39	8	276	Ò	3	Retic 1.3	
	7 14	44.7 41.8	14.5 14.2	5.0	89.4 85.3	29.0 29.0	32.4L 34.0	. 5.1 4.3	42 46	42 44	13H 6	300 275	0	2	Retic 1.5 Retic 1.4	
	74	41.0	14.2	.4.9	67.3	29.0	ж.0	4.3	•	**	•	2,3	•	•	MECIC 1.4	
504									~	68	10	104	0		Datis 0 7	P
	- 6 0	48.6 47.1	16.7 16.3	5.4 5.3	90.0 88.9	30.9 30.8	34.4 34.6	9.4 6.0	20 34	55	10 9	184 234	Ö	1	Retic 0.2L Retic 1.4	•
	2	47.9	16.4	5.4	88.7	30.4	34.2	7.2	26	64	•	226	Ò	1	Retic 0.5	
	3 7	49.1 45.9	17.0 15.6	5.5 5.0	89.3 91.8	30.9 31.2	34.6 34.0	7.0 4.6	37 32	52 56	9	220 181	0	1 2	Retic 0.9 Retic 0.8	
	14	45.6	16.1	5.1	89.4	31.6	35.3	5.3	29	59	ě	192	ŏ	3	Retic 1.1	
585	- 6	45.3	15.1	4.9	92.4	30.8	33.3	5.7	24	66	9	294	0	1	Retic 1.5	1 MG
	0	41.7	14.4	4.6	90.7	31.3	34.5	5.0	32	57	8	245	G	2	Retic 1.3	
	2	44.7	14.8	4.9	91.2	30.2	33.1	7.2	32	59 58	7 7	272 256	0	2 2	Retic 0.8 Retic 0.6	
	3 7	42.4 43.1	14.5 14.6	4.7 4.7	90.2 91.7	30.9 31.1	34.2 33.9	6.6 5.5	32 26	65	6	293	ŏ	î	Retic 0.8	
	14	41.6	14.5	4.6	90.4	31.5	34.9	4.9	27	63	7	270	Ō	2	Retic 1.3	
586																
200	- 6	47.7	15.9	5.3	90.0	30.0	33.3	7.4	25	67	7	258	0	ᅂ	Retic 0.8	1 MG
	0	47.3	16.1	5.3	89.2	30.4	34.0	9.4	20	73	6	304	0	OL.	Retic 0.9	
	2 3	45.6 45.9	15.4 15.6	5.2 5.2	87.7 88.3	29.6 30.0	33.8 34.0	7.0 7.3	41 42	49 48	7 6	29 3 28 6	0	2 2	Retic 0.7 Retic 1.1	
	ž	45.0	15.0	5.0	90.0	30.0	33.3	6.1	33	56	6	253	ŏ	2	Retic 0.9	
	14	44.5	15.3	5.1	87.3	30.0	34.4	5.9	39	50	7	275	0	3	Retic 0.8	
587																
	- 13	49.0	16.0	5.6	87.5	28.6	32.7	6.2	36	51	9	230	0	3	Retic 0.3	P
	0 2	47.9 48.0	15.6 15.2	5.5 5.4	87.1 88.9	28.4 28.1	32.6 31.7L	6.7	35 46	55 45	4	225 221	0	4	Retic 0.7 Retic 0.8	
	ŝ	45.5	15.1	5.3	85.8	28.5	33.2	7.9	37	52	5	219	. 0	Ä	Retic 0.7	
	7	44.4	14.9	5.2	85.4	28.7	33.6	7.9	32	60	4	256	0	3	Retic 1.3	
	14	47.0	15.5	5.6	83.9	27.7	33.0	5.7	31	60	3 .	254	0	4	Retic 0.7	
588											_		_	_		P
	- 6	44.1	14.2	4.7	93.8	30.2 31.0	32.2L 32.5L		41. 38	47 54	5 4	242 270	0	6 4	Retic 1.0 Retic 1.0	P
	0 2	46.7 47.2	15.2 15.5	4.9 5.0	95.3 94.4	31.0	32.8	6.0	56H	30L	5	264	ŏ	7	Retic 1.4	
	3	44.5	14.9	4.8	92.7	31.0	33.5	5.5	45	42	5	252	0	6.	Retic 0.8	
	7 14	40.9 44.4	13.8 14.9	4.4	93.0 90.6	31.4 30.4	33.7 33.6	5.6 5.3	37 41	49 43	5 5	243 274	0	8H 9H	Retic 1.3 Retic 1.0	
		****	•••	•••	,,,,											
589		47.0	36.4			ם נר	24.2	7.2	39	51	6	282	0	3	Retic 1.8	5 MG
	- 5	47.8 49.2	15.4 16.7	5.7 5.8H	83.9 84.8		34.3 33.9	6.9	40	48	5	292	ŏ	ś	Retic 1.5	5 MU
	2	48.2	16.4	5.7	84.6	28.8	34.0	8.1	37	52	6	293	0	1	Retic 1.7	
	3 7	48.6 43.7	17.1 15.5	5.8H 5.3	83.8 82.5	29.5 29.2	35.2 35.5	7.8 7.2	37 37	52 51	5 7	29 <b>9</b> 301	Ö	- 1	Reticl.4 Retic l.8	
	14	48.0	16.6		82.8		34.6	7.4	35	55	6	303	0	3	Retic 2.3H	
590																
770	- 6	51.1H	16.9	5.3	96.4	31.9	33.1	5.3	28	64	5	250	0	1	Retic 1.0	5 MG
	0	48.5	16.2	5.1	95.1		33.4	4.0L		53	5	208	0	2	Retic 1.0	
	2	49.3 46.3	16.4 15.8	5.2 5.0	94.8 92.6		33.3 34.1	4.4	41 37	44 52	8 6	225 226	0	3 2	Retic 1.2 Retic 1.0	
	i	43.7	15.3	4.8	91.0		35.0	4.6	29	64	5	245	Ō	1	Retic 1.2	
	14	44.8	15.2	4.8	93.3	31.7	33.9	4.0L	34	53	7	283	0	3	Retic 1.7	
591																
	- 20	51.1M	17.2	5.5	92.9		33.7	5.9	45	45	. 8	283	0	2	Retic 0.6	P
	0 2	43.3 46.6	15.2 15.6	4.0 5.1	90.2 91.4		35.1 33.5	4.8 6.0	38 39	48 50	10 8	260 235	0	3 3	Retic 1.4 Retic 0.9	
	ź	48.8	16.5	5.4	90.4		33.6	7.1	40	48	ě	251	ŏ	ž	Retic 1.1	
592																
774	- 20	44.0	14.6	4.2L	104.H	34.8H	33.2	4.6	33	53	10	350H	0	3	Retic 0.6	. 15 MG
	0	45.6	15.7	4.8	95.0	32.7	34.4	5.3	40	44	10	355H	0	5	Retic 1.0	
	2	44.1 42.7	14.2 14.4	5.3 4.5	83.2 94.9	26.6L 32.0	32.2L 33.7	5.5 5.5	38 45	53 41	7 9	18 <b>8</b> 305	0	1	Retic 0.9 Retic 0.7	
	7	45.9	15.7	4.9	93.7	32.0	34.2	5.4	39	46	9	356H	Ö	4	Retic 0.9	
	14	47.0	15.6	4.0	97.9	32.5	33.2	5.6	40	48	8	37 <b>6</b> H	0	2	Retic 0.9	

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H - HIGH L - LOW

APPENDIX C

SUB.;	
3000	

3000	STUDI	<b>?</b>				•	•									
NO	DVA	HCT	HGI	B RI	PS MC	HCH V	MORC	HEC	LYNENS	SEGS	MONOS	PL15	MT.	906IN	CDPENTS	DRUG DOSE OR PLACEBO (P)
593																
	- 6 0 2 3 7 14	42.7 42.5 44.9 47.4 43.2 43.2	14, 14, 15, 15, 14,	9 4. 5 4. 6 5. 8 4.	7 90. 8 93. 1 92. 7 91.	4 31.3 5 32.3 9 30.6 9 31.5	35.1 34.5 32.9 34.3	6.0 7.2 7.9 6.1	36 42 39 38 37 37	53 47 51 51 50 54	8 8 7 8 9	273 299 272 313 290 294	0 0 0 0	2 2 2 2 2 2 2	Retic 1.3 Retic 1.5 Retic 1.3 Retic 1.3 Retic 1.4 Retic 1.7	P
594	- 6	46.3	14.	5 5.	3 87.	4 27.6	31.3	L 4.2	<b>A</b> Out	45	_		-			
	0 2 3 7 14	44.2 43.2 46.3 43.2 42.8	14. 14. 15. 14.	0 5. 5 4. 2 5. 5 5.	0 88. 6 93. 6 82. 2 03.	4 28.0 9 31.5 7 27.1 1 27.9	31.7 33.6 32.8 33.6	4.7	49H 40 41 46 50H 54H	43 54 47 47 40 38L	5 5 8 4 6 5	203 173 306 199 189 177	0000	2 1 3 2 2 2	Retic 0.6 Retic 0.7 Retic 1.0 Retic 0.6 Retic 0.4 Retic 0.7	15 MG
595	- 13	48.3	15.	5 5.	3 92.	1 31.3	34.0	4.9	33	55		124-	_			
	0 2 3 7 14	45.2 47.3 44.8 42.6 44.0	15.1 15.0 14.0 15.0	1 4.0 2 4.9 3 4.9	94. 96. 91. 92.	2 31.5 5 31.0 4 30.6 6 31.3	33.4 32.11 33.5 33.6 34.1	4.0L	34 39 37 31 30	53 50 50 60 58	6 7 9 6 7	126L 162 169 180 157 169	0 0 0 0	3 5 3 2 4	Retic 1.2 Retic 1.4 Retic 1.3 Retic 1.5 Retic 0.8 Retic 1.8	ρ
596	- 6	47.8	16.6	5.2	91.9	31.9	34.7	5.1	26	66	6	208	0		- 4: • 4	
	0 2 3 7 14	48.1 48.8 49.4 46.4 46.5	16.1 16.2 16.4 15.5 15.9	5.0 5.4 5.0	92.1 97.0 91.1 92.1	31.0 5 32.4 5 30.4 6 31.0	33.5 33.2 33.2 33.4 34.2	5.9 6.3 5.6 5.7 5.6	29 44 43 31 28	64 43 46 60 65	4 7 6 6 5	224 189 157 212 237	0000	1 2 3 3 2	Retic 1.4 Retic 1.4 Retic 1.5 Retic 1.1 Retic 1.1 Retic 1.2	P
597	- 6							•			-		•	•	MEGGC 1.2	
	0 2 3 7	42.5 42.9 43.8 44.5 41.8 42.6	14.6 14.1 14.6 14.8 13.8	5.3 5.5	80.9 79.6 78.1 78.9	71. 27.0 26.61 11. 26.51 11. 26.01 11. 26.01 11. 26.61	33.3 33.3 33.0	3.7L 4.2 5.6 5.4 4.8 4.0L	52H 48H 52H 52H 50H 50H	39 43 39 38L 41 42	7 6 7 6 5	190 180 208 212 211 197	0 0 0	1 2 2 2 2	Retic 1.5 Retic 0.8 Retic 0.9 Retic 1.2 Retic 1.2	20 MG
598.									300	<b>V</b> 2	,	171	·	2	Retic 1.3	
	- 6 0 2 3 7 14	46.1 48.9 52.3H 47.7 45.4 43.2	16.3 16.5 17.0 16.5 15.5	4.9 5.1 5.2 5.0 4.9 4.6	94.1 95.9 100.1 95.4 92.7 93.9	32.4 H 32.7 33.0	35.4 33.7 32.5L 34.6 34.1 35.2	5.9 8.9 6.8 6.7 8.9 8.3	36 28 37 39 23 26	47 62 47 47 65 60	11 6 8 8 10 9	277 283 265 243 289 285	0 0 0	5 3 5 4 2	Retic 1.1 Retic 1.4 Retic 0.8 Hetic 1.0 Retic 1.0 Retic 2.0H	zo MG
599		47.4											•	•	REGAC B.OH	
	- 12 0 2 3 7 14	47.4 47.3 47.8 47.9 46.4 48.4	15.6 15.4 15.0 16.1 15.5 16.4	5.5 5.5 5.5 5.4 5.6	87.1 85.9		32.9 32.6 33.1 33.6 33.4 33.9	4.1L 4.8 5.3 5.2 4.6 4.6	30 26 31 30 27 28	59 63 58 58 61 59	5 4 5 3 6	273 311 315 311 295 283	0 0 0	5 6 6 6	Retic 1.2 Retic 0.9 Retic 0.6 Retic 1.2 Retic 1.2 Retic 1.4	25 MG
600	- 6	44.5	15.1	5.0	<b>9</b> 0 A	30.2	33.9	1	40				_			
	0 2 3 9 14	48.0 47.5 44.4 47.1 46.0	16.2 16.0 15.4 15.2 15.5	5.4 5.2 4.9 5.2 5.1	88.9 91.3 90.6 90.6	30.0 30.8 31.4 29.2 30.4	33.8 33.7 34.7 32.3L 33.7	3.6L 8.2 6.6 5.4 4.2 3.7L	40 22 45 40 34 43	47 70 44 50 57 47	5 5 5 4 5	176 204 204 201 230 223	0 0 0	6 2 5 4 4	Retic 1.3 Retic 1.3 Retic 1.6 Retic 1.0 Retic 1.3 Retic 1.6	zs MG
601	- 20	46,5	15.3		96 1	20.2	33.0		100							
	0 2 3 7 14	43.8 45.5 43.8 44.1 46.9	14.5 15.1 14.7 14.5 16.1	5.4 5.0 5.2 5.0 4.9 5.4	87.6 87.5 87.6 90.0	29.4	32.9 33.1 33.2 33.6 32.9 34.3	9.0 6.4 7.0 7.5 6.7 5.7	17 <u>L</u> 37 43 40 40 42	70 51 43 47 47	10 8 8 9 8	252 224 281 243 250 248	0 0 0	4	Retic 1.2 Retic 1.7 Retic 1.3 Retic 1.5 Retic 1.9	P
602										•	·	- ·•	•	•	Retic 1.5	
	- <b>6</b>	44.7 46.0	14.8	5.2 5.3	86.0 86.8		33.1 32.6	5.6 8.4	33 20	55 69	8	273 281	0		Retic 0.8 Retic 0.7	P

H - HIGH L - LOW

APPENDIX C

HEDOCOCOTY

<b>IN</b>																
0005	STUDY															
NO	DAY	HCT	100	MIC	HCV	HCH	MORC	MEC	LYMPHS	SEGS	MONOS	PLTS	ATL	605 IN	COMPANS	DRUG DOSE OR PLACEBO (P)
	2	46.9	15.3	5.4	86 9		32.6	7.6	23	60	12	245	0	4	Retic 0.9	
	3 7	45.9 43.6	15.4	5.3	86.6		33.6	6.1 8.9	30 15L	52 71	13H 10	226	0	4	Retic 0.7	
	14	44.7	14.5 15.3	5.1 5.2	85.5 86.0		33.3 34.2	5.3	32	54	10	254 263	0	3	Retic 0.6 Retic 1.0	
603																
	- 6	45.6	16.0	5.2	88.1		34.9	4.5	35	50	8	254	0	5	Retic 1.1	30 MG
	0 2	48.4 46.7	16.2 15.4	5.3 5.1	91.3 91.6		33.5 33.0	6.1 5.1	40 34	45 49	9	276 245	0	5 7	Retic 0.8 Retic 0.7	
	3	47.8	15.3	5.3	90.2	28.9	32.0L		29	57	7	244	0	6	Retic 0.9	
	7 14	46.2 46.2	15.8 15.2	5.0 5.0	92.4 92.4		34.2 32.9	4.3 5.3	39 41	49 47	6	269 298	0	5 5	Retic 0.7 Retic 0.9	
604										•	•		,	-		
-	- 6	45.6	16.1	5.2	87.7		35.3	5.5	23	64	9	247	0	2	Retic 0.9	P
	0 2	44.8 46.0	15.1 15.1	4.9 5.1	91.4		33.7 32.0	5.3 5.2	27 32	63 58	6 7	227 245	0	3	Retic 0.8	
	3	47.1	15.5	5.2	90.6		32.9	5.5	32	58	6	258	Ö	3 3	Retic 1.2 Retic 1.3	
	7 14	46.7 50.1	15.7 16.5	5.1 5.5	91.6 91.1	30.0 30.0	33.6 32.9	4.4	34 32	56 59	7 6	241	0	3	Retic 0.7	
	44	30.1	19.5	3.3	74.1	JU. U	32.9	4.7	32	77	•	274	0	2	Retic 1.3	
605	- 27	44.9	15.0	5.0	89.8	30.0	33.4	5.4	22	65	8	220	0	3	Retic 1.2	30 MG
	0	41.8	14.4	4.7	88.9	30.6	34.4	5.7	28	56	9	224	Ö	5	Retic 1.4	30
	2	46.0 46.2	15.3 15.4	5.3 5.2	86.8 88.8	28.9 29.6	33.3 33.3	7.3 7.0	27 29	59 58	10 8	285 250	0	4	Retic 1.9 Retic 2.1H	
	7	43.5	14.6	4.8	90.6	30.4	33.6	6.7	24	64	6	260	Ö	5	Retic 1.8	
	14	43.9	14.3	4.8	91.5	29.8	32.6	5.9	33	55	6	248	0	4	Retic 1.7	
606	- 62	49.0	16.0	5.6	87.5	28.6	32.7	6.2	36	<b>E</b> 1	•	220	•		D-4	_
	- 02	43.2	14.2	5.0	86.4	28.4	32.7	5.8	35	51 54	9	230 216	0	3 6	Retic 0.3 Retic 0.5	P
	2	47.9	15.2	5.5	87.1	27.6	31.70	6.7	42	47	5	228	0	5	Retic 0.8	
	3 7	46.9 43.5	15.0 15.0	5.5 5.2	85.3 83.7	27.3 28.8	32.0L 34.5	7.2 5.8	41 47H	37L 39	10 7	218 252	0	9H 6	Retic 0.7 Retic 0.3	
	14	43.1	14.1	5. i	84.5	27.6	32.7	5.9	40	47	6	249	0	6	Retic 0.7	
607																
	- 6 0	46.8 47.8	15.6 15.4	5.4 5.3	86.7 90.2	28.9 29.1	33.3 32.2L	4.5 4.2	45 54H	46 35L	7 9	214 219	0	2	Retic 1.6 Retic 1.1	35 MG
	2	47.0	15.0	5.3	88.7	20.3	31.91	4.4	58H	32L	é	192	ŏ	i	Retic 1.2	
	3 7	45.1 43.9	15.1 14.1	5.2 4.9	86.7 89.6	29.0 28.8	33.5 32.1L	4.4	61H 42	28L 49	7 6	204 192	0	3 2	Retic 1.3	
	14	46.3	14.7	5.2	89.0	28.3	31.76	4.5	42	49	6	204	ŏ	2	Retic 1.1 Retic 1.8	
608																
	- 48	46.5	15.3	5.4	86.1	28.3	32.9	9.0	176	70	10	252	0	2	Retic 1.2	35 MG
	0 2	45.1 41.6	14.6 13.7	5.0 4.7	90.2 88.5	29.2 29.1	32.4L 32.9	6.3 6.9	32 34	50 55	7	250 232	0	3	Retic 1.3 Retic 1.1	
	3	44.5	14.7	5.1	87.3	28.8	33.0	7.5	38	51	6	255	0	4	Retic 1.7	
	7 15	44. <b>6</b> 46.9	14.2 15.6	5.1 5.4	87.5 86.9	27.8 28.9	31. <b>8</b> L 33.3	5.7 7. <b>6</b>	29 32	60 59	6 5	269 291	0	4	Retic 1.0 Retic 1.8	
<b></b>				•••	••••					•	-	-/-	•	•		
609	- 86	44.1	14.2	4.7	93.8	30.2	32 . ZL	6.0	41	47	5	242	0	6	Retic 1.0	P
	2	45.6 46.5	14.9 15.4	4.9 5.1	93.1 91.2	30.4 30.2	32.7 33.1	4.7	44 47H	45 41	7	306 26 <b>8</b>	0	3	Retic 0.9	
	3	47.2	16.0	5.3	89.1	30.2	33.9	6.1	46	42	ž	311	ŏ	4	Retic 1.0 Retic 0.8	
	7 14	41.8 44.3	13.5 14.4	4.6 4.6	90.9 92.3	29.3	32.3L 32.5L	6.8 5.5	37 <b>42</b>	51 47	7	248 252	0	4	Retic 0.7	
	14	44.3	14.4	4.0	74.7	30.0	32.30	3.3	72	•,	•	434	•	•	Retic 1.0	
610	- 83	49.0	16.0	5.6	87.5	28.6	32.7	6.2	36	51	9	230	0	3	Retic 0.3	P
	0	48.5	15.6	5.6	86.6	27.9	32.2L	6.2	40	49	7	252	0	3	Retic 0.7	
	2 3	44.6 44.9	15.1 15.5	5.4 5.5	82.6 81.6	28.0 28.2	33.9 34.5	6.2 7.4	51R 47H	376 43	8 5	21.2 229	0	3	Retic 1.2 Retic 0.9	
	7	45.0	14.4	5.3	84.9	27.2	32.OL	6.1	37	53	5	228	0	4	Retic 0.4	
	14	42.5	13.9	4.9	86.7	28.4	32.7	6.7	47H	42	6	203	0	3	Retic 1.2	
611	- 6	47.5	15.4	5.5	86.4	28.0	32.4L	4.7	41	52	5	229	0	,	Datia 1 A	40 MG
	0	47.0	15.7	5.7	83.9		32.6	6.8	20	73	5	279	0	2 1	Retic 1.0 Retic 0.5	•0 •0
	3	48.4	15.9	5.6	96.4	28.4	32.9	6.1	42	51 50	4 5	260 259	0	2	Retic 0.9	
	7	48.9 44.1	16.1 14.0	5.7 5.0	85.0 88.2	28.0	32.9 31.7L	5. <b>6</b> 4.8	42 40	50 51	6	241	Ö	2	Retic 0.7 Retic 1.0	
	14	44.9	14.6	5.2	86.3	28.1	32.56		36	55	7	239	0	2	Retic 0.9	

H -HIGH

APPENDIX C HENGTOLOGY

30 m

9/ <b>E</b> J														•		
CONE	STUDY					٠										
NO	DAY	HCT	HGB	MEC	MCV	MCH	MOHC	MEC	LYMPHS	SECS	MONOS	PLTS	ATL	ECS IM	COMENTS	DRUG DOSE OR PLACEBO (P)
612	- 6 0 2 3 7	49.1 48.0 48.0 50.6 49.4 48.8	16.4 16.0 15.9 16.6 15.7	5.4 5.5 5.4 5.4	90.9 87.3 88.9 88.8 91.5	29.4 29.1 29.1	33.4 33.3 33.1 32.0 31.8L 32.4L		37 31 42 42 38 32	49 60 46 49 51 58	10 6 7 5 7	268 262 268 270 255 277	0 0 0 0	3 2 3 3 3 2	Retic 1.0 Retic 0.6 Retic 1.2 Retic 0.3 Retic 1.5 Retic 0.8	P
67.3	- 6 0 2 3 7	48.4 44.1 47.0 47.8 45.4	16.0 14.3 15.7 15.7 14.7 15.9	4.9 4.5 4.8 4.9 4.5	98.0 97.9 97.6	32.7 31.8 32.7 32.0 1 32.7 32.4	33.1 32.4L 33.4 32.6 32.4L	5.5 6.0 5.3 5.6 5.1 6.5	30 28 39 41 33 29	63 61 50 51 57 62	5 6 5 4 5	323 297 295 268 256 289	0	2 4 6 3 4	Retic 1.2 Hetic 0.4 Retic 1.2 Retic 0.8 Hetic 1.2 Hetic 0.8	P
614	- 6 0 2 3 7 14	47.7 44.9 49.9 49.2 46.3 46.9	15.4 14.9 16.2 16.1 14.5 15.0	5.3 5.2 5.6 5.5 5.1 5.3	90.0 86.3 89.1 89.5 90.8 80.5	29.1 28.7 28.9 29.3 28.4 28.3	32.3L 33.2 32.5L 32.7 31.3L 32.0L	6.2 4.5 4.7 5.0 4.8 4.9	41. 37 38 38 39 45	51 50 48 49 42 46	3 4 4 4 5	240 207 227 227 227 222 247	0 0 0	4 7 9H 8H 7 6	Retic 1.3 Hetic 1.2 Hetic 1.3 Retic 0.6 Retic 1.6 Retic 1.3	40 MG
615	- 60 0 2 3 7 14	44.1 43.8 46.7 46.8 36.0L 45.0	14.2 15.1 15.6 16.2 12.5L	4.7 4.9 5.2 5.3 4.1L 4.9	93.8 89.4 89.8 88.3 87.8 91.8	30.2 30.8 30.0 30.6 30.5 30.0	32.2L 34.5 33.4 34.6 34.7 32.7	6.0 4.7 5.4 6.2 5.7 5.2	41 45 47H 00L 42 41	47 45 41 00% 48 50	5 4 5 0L 7 6	242 307 290 293 268 306	0	6 3 7 0 3 3	Retic 1.0 Rotic 1.9 Retic 1.1 Hetic 1.2 Retic 1.4 Retic 1.7	45 MG
616	- 30 0 2 3 7 14	45.8 43.2 47.6 47.1 37.7L 46.1	15.4 13.9 15.8 16.1 13.3L	5.1 4.7 5.2 5.3 4.3L 5.0	89.8 91.9 91.5 88.9 87.7 92.2	30.2 29.6 30.4 30.4 30.9 30.2	33.6 32.2L 33.2 34.2 35.3 32.8	4.6 2.5L 3.6L 4.4 3.8L 4.4	23 40 40 43 30 29	73 52 52 51 63 65	3 3 4 4 5	278 280 206 263 237 301	0	1 2 4 1 1	Retic 0.5 Retic 1.0 Retic 1.1 Retic 1.2 Retic 0.8 Retic 1.1	45 MG
617	- 6 0 2 3 7	42.1 37.6L 37.1L 37.6L 34.6L	14.3 12.0L 12.5L 12.9L 12.0L 13.1L	4.7 4.2L 4.1L 4.3L 4.0L 4.4	89.6 89.5 90.5 87.4 86.5 92.3	30.4 28.6 30.5 30.0 30.0 29.8	34.0 31.9t 33.7 34.3 34.7 32.3L	3. LL 3. 3L 4.0L 5.1 4.3 3.5L	52H 54H 49H 39 33	42 40 44 54 61 47	4 2 4 5 5 6	316 277 298 304 328 404H	0 0 0 0 0	1 1 3 1 1	Retic 0.7 Hetic 1.3 Hetic 1.2 Retic 1.5 Hetic 1.6 Hetic 1.7	P
618	- 6 0 2 3 7	47.7 42.4 43.0 44.5 39.0L 40.9	16.2 14.6 14.6 15.1 13.4	5.5 4.9 5.0 5.2 4.6 4.6	86.5 87.6 85.6 84.8	29.5 29.8 29.2 29.0 29.1 29.6	34.0 34.4 33.3 33.9 34.4 33.3	6.4 6.5 7.2 6.7 8.9	35 46 53H 52H 35 20	59 48 39 43 57 74H	4 1L 4 2 7 5	241 278 215 201 225 276	0 0 0	1 2 4 2 0L 1	Retic 0.9 Retic 1.1 Retic 1.5 Retic 1.3 Retic 1.1 Retic 2.0H	Р
619	- 6 0 2 3 7	46.2 50.1 48.5 48.8 48.0 47.2	15.6 16.1 16.2 16.1 15.4 15.7	5.0 5.2 5.2 5.0 5.1 5.0	93.3	31.0 31.2 32.2 30.2	33.0 32.1L 33.4 33.0 32.1L 33.3	3. <b>8</b> L 4.6	41 37 48H 45 36 38	41 48 40 36L 43	10 9 7 9 11 10	242 248 215 224 262 243	0 0 0 0	7 6 5 8ti 9H 7	Retic 1.2 Retic 1.5 Retic 0.7 Retic 1.1 Retic 0.8 Retic 0.8	Р
60	- 90 0 2 3 7	44.7 48.3 46.4 46.7 46.6 44.3	14.0 15.6 15.3 15.7 15.0	5.2 5.4 5.4 5.3 5.3 5.3	89.4 85.9 88.1	28.5 28.9 28.3 29.6 28.3 28.3	33.1 32.3L 33.0 33.6 32.2L 33.2	4.8 5.9	33 34 32 29 32	55 54 55 69 56 50	8 6 12 9	273 330 280 299 346 278	0 0 0	3 5 4 6 5	Retic 0.8 Retic 1.2 Hetic 1.7 Retic 1.3 Hetic 0.5 Retic 0.4	50 MG
621	- 6 0 2 3	45.2 53.44 49.5 47.9	15.1 16.0 16.1 15.4	5.3 5.9H 5.5 5.2			33.4 31.5L 32.5L 32.2L	6.3	34 36 37 40	57 56 54 48	7 6 6 10	300 309 271 276	0 0 0	2 1 2 2	Retic 1.4 Retic 1.6 Retic 1.2 Retic 1.7	P

H - HIGH

L - LOW

AST ● BASTATA ● BASTATATA ● STATISTICA ● BASTA ● BASTATA ● BASTATATA

## APPENDIX C

#### **EPATOLOGY**

Pape 5

SUNJ						•										
3000	STUDY															
NO	DAY	HCT	RGB	RBC	MCV	HCH	нонс	WEC	LYMPHS	SEGS	MONOS	PLTS	ACT.	eos in	COMMENTS	ORUG DOSE OR PLACEBO (P)
	7	44.0	15.1	5.3	83.0	28.5	34.3	6.9	41	51	6	31.7	G	2	Retic 0.7	
	14	46.2	15.2	5.3	87.2	28.7	32.9	8.0	34	59	5	349H	0	ī	Retic 1.2	
622																
	- 6	47.9	16.1	5.7	84.0	28.2	33.6	3.8L	52H	39	5	269	0	4	Retic 0.5	SO MG
	0	48.1	15.6	5.4	69.1	28.9	32.4L	3. BL	55H	38L	3	280	0	4	Retic 1.2	
	3	52 . SH	17.0	6. LH	86.1	27.9	32.4L		52H	42	3	246	0	2	Retic 0.7	
	3	53.58	17.6H	6.3H	84.9	27.9	32.9	5.4	50H	40	6	264	0	4	Retic 1.0	
	, 7	45.6	14.6	5.3	86.0	27.5	32.0L		52H	39	6	260	0	3	Retic 0.6	
	14	48.0	16.2	5.6	85,7	28.9	33.8	4.1L	50H	40	5	317	0	4	Retic 0.7	
623																
	- 13	42.5	14.3	5.2	81.7	27.5	33.6	5.3	33	58	5	211	0	3	Retic 0.7	60 MG
	0	46.7	14.9	5.4	66.5	27.6	31.96		36	53	5	217	ŏ	j	Retic 0.8	
	2	44.5	14.4	5.2	65.6	27.7	32.4L		50H	37L	8	194	ō	Š	Retic 2.0H	
	3	42.5	13.9	4.8	88.5	29.0	32.7	3.76	58H	26L	8	183	0	<b>BH</b>	Retic 1.6	
	7	40.2	13.5	4.8	83.8	28.1	33.6	5.4	30	59	6	163	0	4	Retic 1.3	
	15	45.3	14.8	5.2	87.1	28.5	32.7	4.5	37	54	5	220	0	3	Retic 1.0	
624		,														
624	- 6	48.0	15.8		100.H	32.0	32.9	4.7	16		-	222	•		5-4-1-1	60 MG
	- <b>0</b>	47.7	15.3	4.8	99.4H		32.1L	5.3	35 22	54 59	7 11	237 268	0	3 7	Retic 1.4 Retic 0.7	90 MG
	ž	49.4	16.0	4.9	100.H		32.4L	6.5	32	56		251	ă	4	Retic 1.9	
	i	48.0	15.8	4.6		34.3H	32.9	5.9	39	51	7	246	ŏ	j	Retic 1.2	
	ī	45.1	14.8	4.6		32.2	32.8	5.1	35	52	ģ	248	ă	ź	Retic 0.8	
	14	52 . <b>4</b> H	16.9	5.1	102.H		32.3L	8.1	24	67	6	237	ŏ	ž	Retic 1.3	
625	- 6	51.7H				20. 2		4 10				366	•			P
	- 0	49.5	16.9 16.8	6.0H 6.2H	86.2 79.8L	28.2 27.1	32.7 33.9	4.1L 4.9	30 33	57 54	6 6	265 338	0	5	Retic 2.0H	Υ
	2	53.6H	17.1	6. LH	87.9	28.0	33.9 31.9L	5.5	33 30	53	8	299	Ö	<b>6</b> H	Retic 1.1 Retic 1.7	
	ĵ	50.7H	16.9	6.2H	81.8	27.3	33.3	4.9	32	53	å	344	ő	7	Retic 1.9	
	ź	51.8H	17.0	6.2H	83.5	27.4	32.8	4.8	25	\$8	7	314	ő	en	Recic 0.6	
	15	49.4	16.6	6.1H	81.0	27.2	33.6	5.0	28	57	6	308	ŏ	7	Retic 1.0	
							••••									
626											_		_	_		
	- 6	47.2	15.7	5.1	92.5	30.6	33.3	6.9	27	64	6	326	o	2	Retic 2.0H	Р
	0	45.4	14.5	5.0	90.8	27.0	31.96		29	60	8	314	0	3	Retic 0.5	
	2	49.9	16.2	5.3	94.2	30.6	32.5L		43	45		342	0	3	Retic 1.1	
	3 7	51.3H	16.6 13.9	5.3	96.8 90.9	31.3 30.2	32.4L	9.3	39 36	47 55	10 5	350H	0	•	Retic 1.0	
	15	41.8	13.9	4.6		29.6	33.3 32.6	7.6 7.4	J6 30	50 60	6	295 281	0	3	Retic 1.0 Retic 1.4	
	73	42.6	43.7	9.7	70.0	47.0	J4. 0	/. 4	JV	₩.	•	<b>401</b>	v	•	MECTO T'4	

H - HIGH

L - LOW

### APPENDIX D

### HAPTOGLOBIN VALUES

	Drug Dose						
	or	Study	Day				
Subject	Placebo(P)	Scr	Ō	2	3	7	14
	_						
583	P	106	108	110	112	135	114
584	P	106	70	61	58	56	52
585	lmg	86	81	82	76	90	82
586	lmg	162H	149	155н	149	150	147
587	P	85	110	100	100	120	96
588	P	97	102	250H	170H	94	163H <b>\$</b>
589	5mg	67	76	9 4	76	57	121
590	5mg	36	34	58	54	37	33
591	P	98	53	62	64		
59 2	15mg	64	70	126	64	95	78
59 3	P	60	56	61	64	86	56
59 4	15mg	150	130	56	150	86	111
59 <b>5</b>	P	84	129	115	104	105	56
59 <b>6</b>	P	110	94	110	109	125	89
<b>597</b>	20 mg	86	91	112	117	105	112
598	20mg	110	113	104	91	155ส	99
599	25mg	72	59	68	67	72	72
600	25mg	86	95	112	100	84	7 <b>7</b>
601	P	155H	54	70	65	74	69
602	P	61	48	95	107	74	72
603	30mg	65	90	98	103	77	85
604	P	60	56	69	67	64	58
605	30mg	260H	149	147	150	130	129
606	P	85	91	101	100	103	92
607	35mg	102	106	112	71	91	108
608	35mg	155H	69	70	103	58	71
609	P	97	101	107	103	81	86
610	P	85	97	86	102	122	93
611	40mg	93	90	120	110	80	118
612 613	P	80	62	87	87	76	78
614	P 40mg	57	17L	24	26	20	8L*
615		78	74	89	83	80	63
616	45 mg	97	91	87	100	88	92
617	45 mg	80	61	72	77	56	70
618	P	91	68	81	91	91	102
619	P P	125	100	79	96	80	108
620		73	80	93	89	83	95
621	50 mg P	61	83	85	79	83	78
622	50 mg	99	102	103	95	89	66
623	60mg	73	75 76	89	95	70	77
624	60 mg	87	76	80	77	90	116
625	P	53	40	54	57	58	89
626	P	79	88	84	86	109	93
<b>340</b>	F	155H	151H	165H	149	114	162H

**<sup>\$</sup>** H- High **\*** L- Low

Normal range: 18.7-150.8 mg/dl

# APPENDIX E

INDIVIDUAL CLINICAL SUMMARIES

SUBJECT#583 EXPERIMENT#21 GROUP# 1 DRUG(NO mg)
PLACEBO

SYMPTOMS: 1s: 1830-cramps in biceps

2330-nausea for about 5 minutes. 2s: 0730-stomach "cramps and spasms"

# ABNORMALITIES COMMENT

PHYSICAL EXAM: Peroneal pattern of atrophy of rt. leg (2ndary to infantile poliomyelitis).

VITAL SIGNS: ----

## **HEMATOLOGY:**

POTENTIAL CONTRACTOR

Scr: MCHC 32.1 Low \*
0s-3s: Lymphs 49-51 High (3x) \*
2s: Segs 38 Low
7s: MCHC 32.4 Low
Monos 13 High

## CHEMISTRIES:

 Scr:
 SGOT
 38
 High

 T Prot.
 8.2
 High

 0s:
 SGOT
 41
 High

 2s:
 Phos.
 5.4
 High

 3s:
 Phos.
 5.4
 High

 7s:
 Data discarded
 +

## URINALYSIS: ----

CONCLUSIONS: Subject received placebo. Had no new physical findings but had a number of subjective medical complaints. SGOT, SGPT, LDH elevations on 7s after 4 days out of facility and hard physical workout. Enzymes returned to normal in 7 days.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

<sup>+</sup> Outlying data (high SGOT, SGPT) led to discarding all chemistry data from this day.

SUBJECT#584 EXPERIMENT#21 GROUP# I DRUG( NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

Scr: Retic. 0.2 Low

CHEMISTRIES:

3s: SGPT 52 High \*

URINALYSIS: ----

<u>CONCLUSIONS</u>: Subject received placebo, had no symptoms and no physical abnormalities. He had a few inconsistent and minor laboratory deviations from normal.

\*NCSICS-Not clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#585 EXPERIMENT#21 GROUP# I DRUG( 1 mg)
PLACEBO

SYMPTOMS: 1s: 1230 "Gassiness, Queasiness"

2s: 0730-recurrence of above, headache 3s: Muscle pain of anterior chest,

headache.

7s: Recurrences of above while out of

facility.

ABNORMALITIES COMMENT

PHYSICAL EXAM: ---- The complaints voiced by

this subject were not accompanied by physical ab-

normality.

VITAL SIGNS: ---

HEMATOLOGY: ----

CHEMISTRIES:

0s: LDH 112 Low 14s: CO<sub>2</sub> 33 High

URINALYSIS: ----

CONCLUSIONS: Subject had many complaints which could be related to his receiving 1 mg of the drug. The fact that the symptoms persisted to the 7th day suggest that it was not a dose/response phenomenom. Laboratory values were not significantly affected.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#586 EXPERIMENT#21 GROUP#I DRUG( 1 mg)
PLACEBO

**SYMPTOMS:** None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS: --

**HEMATOLOGY:** 

Scr: Hapt. 162 High : Eosins 0 Low Os: Eosins 0 Low

2s: Hapt. 155 High

CHEMISTRIES:

2s: T Prot. 6.0 Low 7s: Na 144 High 14s: T Prot. 6.0 Low

URINALYSIS: -

<u>CONCLUSIONS</u>: Subject received 1 mg of drug. No associated symptoms or physical findings. No evidence of methemogobinemia or hemolysis.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities noted.

<sup>+</sup> Inclusion of subject in study due to laboratory error in reporting high abnormal values.

SUBJECT#587 EXPERIMENT#21 GROUP# 2 DRUG( NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

HEMATOLOGY: ----

2s: MCHC 31.7 Low \*

CHEMISTRIES:

0s: Cl 97 Low
2s: Phos. 5.1 High
LDH 107 Low
3s: Phos. 5.7 High
14s: Trigly. 29 Low
LDH 101 Low

URINALYSIS: ----

CONCLUSIONS: Subject receiving placebo had no symptoms and no abnormal physical findings. Minor variations in laboratory values not consequential to this study.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

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SUBJECT#588 EXPERIMENT#21 GROUP# 2 DRUG( NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS: ----

**HEMATOLOGY:** 

Ser: MCHC 32.2 Low \* 0s: MCHC 32.5 Low 2s: Lymphs 56 High 30 Segs Low 250 High \* Hapt. 3s: Hapt. 170 High \* 7s: Eosins 8 High 9 14s: Eosins High Hapt. 163 High \*

CHEMISTRIES

Scr: Cl 108 High 7s: Ca 8.8 Low 14s: Ca 8.8 Low

URINALYSIS:

<u>CONCLUSIONS</u>: Subject received placebo, had no symptoms nor abnormalities on physical exam. Laboratory studies showed minor deviations not related to study participation.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#589 EXPERIMENT#21 GROUP# 2 DRUG( 5 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

 0s: RBC
 5.8
 High

 3s: RBC
 5.8
 High

 14s: RBC
 5.8
 High

 Retic.
 2.3
 High

CHEMISTRIES:

Scr-3s: Phos 5.4-6.2 High (4x)Ser: K+ 3.5 Low  $\infty_2$ 33 High 3.6 Low 3s: Na 144 High 7s: Na 145 High Uric H+ 8.1 High

URINALYSIS: ---

CONCLUSIONS: Subject received drug. Had no symptoms nor physical findings attributable to drug effect. RBC was consistently slightly over the upper limits of normal. Retic count slightly elevated in screening, 2s,7s,14s. Haptoglobin fell within the treatment period, although stayed within the normal range. These finding are consistent with but not diagnostic of slight aggravation of a pre-existing mild hemolytic condition.

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\*NCSICS-Not clincally significant in context of this study. ----Done as scheduled, no abnormalities.

SUBJECT#590 EXPERIMENT#21 GROUP#2 DRUG(5 mg) **PLACEBO** 

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

High Ser: Het. 51.1 0s: WBC 4.0 Low 14s: WBC 4.0 Low

CHEMISTRIES:

Scr-2s: Chol. High (3x; highest at Scr.) 230-234

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High 0s: Uric H+ 8.1 SGOT 11 Low 7s: K+ 3.6 Low 235 High

14s: Glucose 112 High 8.7 Low Ca

URINALYSIS:

CONCLUSIONS: Subject received drug, had no symptoms nor physical findings attributable to drug effect. CBC and chemistry abnormalities inconsequential. No evidence of hemolysis and no methemoglobinemia.

\*NCSICS-Not clinically significant in the context of this

----Done as scheduled, no abnormalities.

SUBJECT#591 EXPERIMENT#21 GROUP# 2 DRUG( NO mg)
PLACEBO

SYMPTOMS: 1s: 1500, 2130-had very runny bowel movements.

No associated symptoms (had several diet sodas)

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

HEMATOLOGY: ----

Ser: Het. 51.1 High \*

CHEMISTRIES:

Os: Uric H+ 10.5 High

URINALYSIS: ----

CONCLUSIONS: This subject received placebo, and had two "runny bowel movements" on the day of dosing. His laboratory findings showed no consistent abnormalities. He failed to return for the 7s and 14s evaluations, and was lost to follow-up.

----Done as scheduled, no abnormalities.
\*NCSICS-Not clinically significant in the context of this study.

SUBJECT#592 EXPERIMENT#21 GROUP# 2 DRUG(15 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

Ser: RBC 4.2 Low MCV 104 High MCH 34.8 High Plts. 350 High \* Os: Plts. 355 High 2s: MCH 26.8 Low MCHC 32.2 High 7s: Plts. 356 High 14s: Plts. 376 High

CHEMISTRIES:

 Scr:
 SGOT
 11
 Low

 0s:
 Cl
 96
 Low

 2s:
 Na
 135
 Low

 K+
 3.5
 Low

 Glob.
 3.5
 High

URINALYSIS: ----

CONCLUSIONS: Subject who received drug had no symptoms and no physical abnormalities. There were minor, insignificant changes in the blood chemistries. No methemoglobinemia and no evidence of hemolysis.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

SUBJECT#593 EXPERIMENT#21 GROUP# 3 DRUG( NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

HEMATOLOGY: ----

CHEMISTRIES

3s: Chol. 232 High

URINALYSIS: ----

<u>CONCLUSIONS</u>: Subject received placebo; he had no symptoms, no positive physical findings and no significant laboratory abnormalities.

\*NCSICS- Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#594 EXPERIMENT#21 GROUP# 3 DRUG(15 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

STATES TO STATES AND THE STATES OF THE STATE

Ser: MCHC 31.3 Low 49 High Lymphs 0s: MCHC 31.7 Low 50 7s: Lymphs High 54 14s: Lymphs High 38 Segs Low

CHEMISTRIES

 Ser: Glob.
 3.5
 High

 0s: Glob.
 3.4
 High

 3s: T Prot.
 8.2
 High

 Glob.
 3.6
 High

 7s: LDH
 116
 Low

 14s: K+
 3.6
 Low

## URINALYSIS:

<u>CONCLUSIONS</u>: Subject received 15mg of drug. No consistent or significant changes in blood chemistries or hematology values. No evidence of hemolysis and no methemoglobinemia.

<sup>----</sup> Done as scheduled, no abnormalities.

<sup>\*</sup> NCSCIS, Not clinically significant in the context of this study.

SUBJECT#595 EXPERIMENT# 21 GROUP#4 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

Scr: Plts. 126 Low 0s: WBC 4.0 Low 2s: MCHC 32.1 Low

CHEMISTRIES:

Ser: T Bili. 1.3 High Os: Na 144 High Uric H+ 3.7 Low 2s: K+ 3.6 Low 7s: Ca 8.9 Low 14s: Creat. 0.8 Low 48 SGPT High

## URINALYSIS:

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Subject had WBC's of 35/HPF on 0s. Repeat on 1s showed 2-6 WBC/HPF. 9-7 WBC/HPF noted thereafter. NCSICS\*

CONCLUSIONS: Subject received placebo. No symptoms nor positive physical findings noted. No significant abnormalities of laboratory results except for a few WBC noted in urinalysis.

----Done as scheduled, no abnormalities.

\*NCSICS-Not clinically significant in the context of this study.

SUBJECT#596 EXPERIMENT#21 GROUP#4 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

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ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

----

**HEMATOLOGY:** 

----

CHEMISTRIES:

0s: Glucose 111 High 2s: Na 144 High Phos. 5.3 High 14s: Creat. 0.8 Low

URINALYSIS:

<u>CONCLUSIONS</u>: Subject received placebo had no symptoms, no positive physical findings and no significant abnormalities of laboratory examinations.

<sup>\*</sup> NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#597 EXPERIMENT#21 GROUP#4 DRUG(20 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ---

**HEMATOLOGY:** 

Ser-14s: Lymphs 48-52 High (6x)

Scr: MCV 78.7 Low \* WBC 3.7 Low \*

0s-14s: MCH 26.0-26.6 Low \*(5x) 2s-14s: MCV 78.1-80.4 Low (4x)

3s: Segs 38 Low

3s: Segs 38 Low 14s: WBC 4.0 Low

CHEMISTRIES

2s: Phos. 5.1 High 3s: Phos. 5.2 High 7s: SGOT 47 High

URINALYSIS: ----

CONCLUSIONS: Subject received 20 mg of drug and had no symptoms nor abnormal physical findings. No significant deviations from normal were noted in his laboratory examinations. There was no evidence of methemoglobinemia nor of hemolysis.

 ${
m *NCSICS-Not}$  clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#598 EXPERIMENT#21 GROUP#4 DRUG(20 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

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PHYSICAL EXAM: ----

VITAL SIGNS: --

**HEMATOLOGY:** 

2s: MCHC 32.5 Low \*
 Het. 52.3 High \*
 MCV 100 High \*
7s: Hapt. 155 High \*
14s: Retic. 2.0 High \*

CHEMISTRIES:

Ser: Trigly. 331 High 2s: Phos. 5.0 High High Trigly. 387 272 3s: Trigly. High 7s: Uric H+ 7.9 High 14s: Creat. 0.8 Low Trigly. 302 High

## URINALYSIS: --

CONCLUSIONS: Subject received 20 mg of drug. No symptoms and no physical examination abnormalities noted. Triglyceride elevation after drug administration more likely constitutional than drug effect because of presence at screening and at 14s after returning to normal on 7s. Haptoglobin fell from 155(7s) to 99 (14s); \*\*Retic. count rose from 1.0% to 2.0%, the Hct fell from 45.4 to 43.2, the Hgb fell from 15.5 to 15.2 in the same interval. Those findings are consistent with but not diagnostic of hemolysis. Methemoglobin was not detected.

\*NCSICS-Not clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#599 EXPERIMENT#21 GROUP#5 DRUG(25 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

HEMATOLOGY:

Ser: WBC 4.1 Low

CHEMISTRIES:

Ser-14s: Glob. 3.5-3.8 High (6x)

7s: Glucose 60 Low

URINALYSIS: ----

CONCLUSIONS: Subject received 25 mg of drug and had no symptoms; nor did he develop any abnormal physical findings. Laboratory deviatons were minimal. No evidence of hemolysis, no methemoglobin.

\*NCSICS:Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#600 EXPERIMENT#21 GROUP#5 DRUG(25 mg) **PLACEBO** 

SYMPTOMS: 1s:"not hungry"; refused lunch. Evening meal

eaten.

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

Ser: WBC 3.6 Low 9s: MCHC 32.3 Low \* 14s: WBC 3.7 Low

CHEMISTRIES:

2s: Na 148 High Cl 108 High 14s: Uric H+ 3.7 Low

URINALYSIS:

CONCLUSIONS: Subject received 25 mg of drug. He remained asymptomatic and developed no physical abnormalities. His laboratory studies were unremarkable. No hemolysis was seen; no methemoblobin detected.

\*NCSICS: Not clinically significant in the context of this study. ----Done as scheduled, no abnormalities.

SUBJECT#601 EXPERIMENT#21 GROUP# 5 DRUG( NO mg) **PLACEBO** 

**SYMPTOMS:** None

ABNORMALITIES COMMENT PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

Ser: Lymphs 17 Low \*

Hapt. 155 High \*

CHEMISTRIES:

3s: Phos. 5.2 High 7s: T Bili. 1.5 High

URINALYSIS:

CONCLUSIONS: Subject received placebo. Had no symptoms and had no positive physical findings. Transient, unexplained elevation of bilirubin, NCSICS\*.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#602 EXPERIMENT#21 GROUP#5 DRUG(NO mg) **PLACEBO** 

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

High \* 3s: Monos 13 7s: Lymphs Low \* 15

CHEMISTRIES:

7s: K+ 3.6 Low

URINALYSIS:

CONCLUSIONS: Subject received placebo. Had no symptoms, abnormal physical findings nor abnormal laboratory findings as a result of his participation.

----Done as scheduled, no abnormalities.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

SUBJECT#603 EXPERIMENT#21 GROUP# 6 DRUG(30 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: -

VITAL SIGNS: ----

**HEMATOLOGY:** 

3s: MCHC 32.0 Low \*

CHEMISTRIES:

Scr: Glob. 1.8 Low 2s: BUN 21 High \* Creat. 1.6 High 3s: BUN 21 High Cl 95 Low  $\infty_2$ 33 High T Prot. 6.0 Low

Glob. 1.8 Low 7s: BUN 21 High

URINALYSIS: ----

<u>CONCLUSIONS</u>: Subject received placebo. No symptoms nor positive physical findings noted. Laboratory values were not exceptional or noteworthy.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#604 EXPERIMENT# 21 GROUP#6 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

CHEMISTRIES:

0s: K+ 3.5 Low 2s: Ca 8.8 Low 3s: C1 95 Low CO 33 High 7s: K+ 3.5 Low

URINALYSIS: ----

CONCLUSIONS: Subject received placebo. No symptoms nor abnormal physical findings were observed. A number of laboratory abnormalities of the serum electrolytes were observed which were not significant in the context of this study.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#605 EXPERIMENT#21 GROUP#6 DRUG(30 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

Scr: Hapt. 260 High 3s: Retic. 2.1 High

CHEMISTRIES:

;	Ser:	Na $\infty_2$	145 33	High High
	0s: 3s:	Chol. SGPT $\infty_2$ Cl <sup>2</sup> $\infty_2$	229 53 36 95 34	High High High Low High
1		SGPT SGPT SGOT	60 46 11	High High Low

URINALYSIS: ---

CONCLUSIONS: Subject received 30 mg of drug; had no symptoms or abnormal physical findings. Retic count increased during study period, peaking on 7s. SGPT was high at screening but normal on 0s. Subsequent SGPT elevations probably not study related. No methmoglobinemia.

\*NCSICS-Not clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#606 EXPERIMENT#21 GROUP#6 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: -

VITAL SIGNS: --

**HEMATOLOGY:** 

2s: MCHC 31.7 Low 3s: MCHC 32.0 Low Segs 37 Low \* Eosins 9 High \* 7s: Lymphs 47 High \*

CHEMISTRIES:

Scr: Chol. 120 Low Low LDH 112 2s: Chol 121 Low LDH 90 Low 3s: C1 94 Low SGOT 11 Low 7s: K+ 3.6 Low Chol. 120 Low Low Trigly. 25 14s: Trigly. 19 Low

URINALYSIS:

CONCLUSIONS: Subject received placebo. No clinical evidence of adverse effect from participation.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

SUBJECT#607 EXPERIMENT#21 GROUP# 7 DRUG( 35 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ---

VITAL SIGNS: ----

**HEMATOLOGY:** 

0s-3s: Lymphs 54-61 High (3x) \*
: Segs 28-35 High (3x) \*
0s: MCHC 32.2 Low \*
2s: MCHC 31.9 Low

7s: MCHC 32.1 Low 14s: MCHC 31.7 Low

CHEMISTRIES:

Scr: Chol. 229 High Glob. 3.4 High 0s: Glucose 7 2 Low 2s: Na 135 Low K+ 3.6 Low Ca 8.8 Low 3s: LDH 109 Low 7s: Creat. 0.8 Low 14s: Chol. 241 High

URINALYSIS: ---

CONCLUSIONS: Subject received 35 mg of drug. He had no symptoms and no noteworthy physical abnormalities. Laboratory deviations from normal were minimal and suggested no drug effect. No evidence of hemolysis was noted, no methemoglobinemia was detected.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#608 EXPERIMENT#21 GROUP#7 DRUG(35 mg)
PLACEBO

SYMPTOMS: 2s noted fatigue, possibly due to lack of sleep.

ABNORMALITIES COMMENT

PHYSICAL EXAM: --

VITAL SIGNS: ---

**HEMATOLOGY:** 

Scr: Hapt. 155 High \*
Lymphs 17 Low \*
0s: MCHC 32.4 Low
7s: MCHC 31.8 Low

CHEMISTRIES:

2s: Na 135 Low Ca 8.6 Low 14s: LDH 108 Low

URINALYSIS: ----

CONCLUSIONS: Subject received 35 mg of drug; he developed no symptoms and had no physical abnormalities. There were minor variations in the laboratory findings of no evident clinical significance. There was no evidence of hemolysis and methemoglobin was not detected.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT# 609 EXPERIMENT#21 GROUP#7 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: --

VITAL SIGNS: ----

HEMATOLOGY: ----

 Ser:
 MCHC
 32.2
 Low \*

 2s:
 Lymphs
 47
 High \*

 7s:
 MCHC
 32.3
 Low

 14s:
 MCHC
 32.5
 Low

CHEMISTRIES:

High Ser: Cl 108 0s: Glucose 65 Low 135 Low 2s: Na 8.9 Low Ca 3s: LDH 114 Low 14s: K+ 3.6 Low

URINALYSIS:

CONCLUSIONS: Subject received placebo, and had no adverse effect as measured by symptoms, physical examinations or laboratory findings.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#610 EXPERIMENT# 21 GROUP#7 DRUG( NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ---

**HEMATOLOGY:** 

0s: MCHC 32.2 Low 51 High \* 2s: Lymphs Segs 37 Low \* 47 3s: Lymphs High 32.0 7s: MCHC Low High 14s: Lymphs 47

CHEMISTRIES:

0s: SGOT 8 Low 2s-14s: LDH 71-112 Low (4x) 133 2s: Na Low Cl 96 Low 8.4 Ca Low SGOT 10 Low **SGPT** Low 3s: CO, 33 High 7s: BUŃ 21 High

URINALYSIS:

3s: WBC 35-36/HPF, next specimen clear of

WBC.

CONCLUSIONS: Subject received placebo and showed no evidence of adverese reaction to participation by any of the observations outlined in the protocol.

\*NCSICS-Not clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#611 EXPERIMENT#21 GROUP#8 DRUG(40 mg) PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

AAAAAAA DAAAAAA KAAAAA KAAAAA BAAAAAA DAAAAA DAAAAAA

PHYSICAL EXAM: ----

VITAL SIGNS: ---

**HEMATOLOGY:** 

 Ser:
 MCHC
 32.4
 Low

 7s:
 MCHC
 31.7
 Low

 14s:
 MCHC
 32.5
 Low

CHEMISTRIES:

Ser: T Prot. 5.6 Low \* Glob. 1.6 Low Os: Creat. 0.8 Low 2s-14s: T Prot. 5.7-5.8 Low (4x)Glob. 1.7-1.8 Low (4x)2s: 00<sub>2</sub> 33 High  $3s: \infty_2^2$ 33 High 145 Na High K+ 5.6 High Uric H+ 3.4 Low 14s: 00<sub>2</sub> High 33

URINALYSIS: ---

CONCLUSIONS: Subject received 40 mg of drug. There were no abnormal physical findings and no symptoms were noted. Low borderline serum proteins noted on screening perisisted throughout study. His CO2 was also marginally elevated on screening. It is unlikely that the above changes were caused or aggravated by the drug. No evidence of hemolysis was noted, no methemoglobin was detected.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#612 EXPERIMENT#21 GROUP#8 DRUG( NO mg)
PLACEBO

SYMPTOMS: Subject reported slight sore throat on 3s in the a.m. No complaints thereafter.

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ABNORMALITIES COMMENT

PHYSICAL EXAM: --

VITAL SIGNS: ----

**HEMATOLOGY:** 

7s: MCHC 31.8 Low 14s: MCHC 32.4 Low

CHEMISTRIES:

 $\frac{25}{\text{Ser}}$ -7s:  $CO_2$  33 High (5x)

Scr-2s: Creat. 0.8 Low (3x)
2s: Phos. 5.3 High
3s: Phos. 5.0 High
Uric H+ 3.3 Low

Na 147 High 7s: Creat. 0.8 Low 14s: Creat. 0.8 Low

URINALYSIS: ----

CONCLUSIONS: Subject received placebo and had no symptoms, abnormal physical findings, nor laboratory findings that could be attributed to adverse effect from study participation.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#613 EXPERIMENT# 21 GROUP#8 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: --

VITAL SIGNS: ----

**HEMATOLOGY:** 

0s: Hapt. 17 Low : MCHC 32.4 Low \* 7s: MCHC 32.4 Low MCV 100 High \* 14s: Hapt. 8 Low

CHEMISTRIES:

2s: CO<sub>2</sub> 33 High Ca 8.9 Low 3s: Uric H+ 3.6 Low

URINALYSIS: ----

CONCLUSIONS: Subject received placebo and participated throughout the study period withou ill effect. Laboratory deviations were not unusual except for an unexplained low haptoglobin throughout study, exclusive of screening.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#614 EXPERIMENT#21 GROUP#8 DRUG( 40 mg) PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ---

VITAL SIGNS: ----

**HEMATOLOGY:** 

Ser: MCHC 32.3 Low 32.5 2s: MCHC Low 9 Eosin High \* 3s: Eosin 8 High 7s: MCHC 31.3 Low 14s: MCHC 32.0 Low

CHEMISTRIES:

 $\overline{Scr}$ -3s: Uric H+ 2.8-3.8 Low (4x)

0s: Glob. 3.6 High 2s: Creat. 0.8 Low CO<sub>2</sub> 33 High 14s: Glob. 3.4 High

URINALYSIS:

3s: 10-12 WBC/HPF with clumping. Repeat was

clear.

CONCLUSIONS: Subject received 40 mg of drug. There were no subsequent symptoms nor physical abnormalities. No laboratory changes were identified consistent with adverse drug effect. There was no evidence of hemolysis and no methemoglobin.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#615 EXPERIMENT# 21 GROUP#9 DRUG( 45 mg)
PLACEBO

**SYMPTOMS:** None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

----

VITAL SIGNS:

----

**HEMATOLOGY:** 

Ser: MCHC 32.2 Low \* 2s: Lymphs 47 High \*

3s: Lymphs 05

Segs

0§ §Disintegrated cells,

Monos 0§ tests not performed. Eosins 0§

7s: Hct. 36.0 Low+ +Isolated findings
Hgb. 12.5 Low+ of doubtful validity

RBC 4.1 Low+

CHEMISTRIES:

Ser: Cl 108 High 0s: LDH 113 Low 3s: Glob. 3.6 High 3.4 7s: K+ Low Ca 8.8 Low Phos. 2.4 Low 14s: SGOΤ 39 High

URINALYSIS: -

CONCLUSIONS: Subject received 45 mg of drug and had no subsequent symptoms or positive physical findings. He had a variety of laboratory abnormalities, none fitting any particular pathophysiological pattern. He had no clear evidence of hemolysis, methemoglobin was not detected.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT# 616 EXPERIMENT#21 GROUP#9 DRUG(45 mg)
PLACEBO

SYMPTOMS: 2s: "stomach felt funny" in the a.m. No complaints after lunch.

ABNORMAL!TIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

 0s: MCHC
 32.2
 Low \*

 WBC
 2.5
 Low \*

 2s: WBC
 3.6
 Low

 7s: WBC
 3.8
 Low

Hct. 37.7 Low + +Isolated findings Hgb. 13.3 Low + of doubtful validity

## CHEMISTRIES:

Ser:  $\infty_2$ 34 High 8.9 0s: Ca' Low 2s-14s: CO, 34 High (4x) 3s: Uric H+ 3.5 Low 7s: K+ 3.5 Low 8.9 Low Ca T Prot. 6.0 Low

## URINALYSIS:

CONCLUSIONS: Subject received drug. On the morning of dosing he reported "feeling funny in the stomach". Otherwise asymptomatic. No positive physical findings. Laboratory deviations were minor variations of values noted at screening. There was no hemolysis detected and no methemoglobin noted.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#617 EXPERIMENT#21 GROUP#9 DRUG(NO mg) PLACEBO

SYMPTOMS: 2s: had 4 semi-formed stools between 10 am and 8 pm.

**ABNORMALITIES** COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

3.1-4.0 Scr-2s: WBC Low (3x)High (3x) 49 - 54Lymphs

0s: MCHC 31.9 Low

0s-7s: Hct. 34.6-37.6 Low (4x)(4x)RBC 4.0-4.2 Low

0s-14s: Hgb. 12.0-13.1 Low (5x)

32.3 14s: MCHC Low **WBC** 3.5 Low Plts. 404 High High Retic. 1.7

CHEMISTRIES:

Ser-3s: Uric H+ 2.7-3.8 Low (4x)

Ser: Cl 96 Low 0s: BUN Low 6 Trigly. 31 Low T Prot. 6.0Low 2s: CO, 33 7s: Data discarded + High

14S: Trigly. 26 Low

URINALYSIS:

CONCLUSIONS: Subject received placebo. He had for soft stools on 2s but no abnormal physical findings. He had a variety of laboratory abnormalities, some unexpected and inexplicable. In retrospect, he was not an ideal subject, but he makes an interesting "control". Had he received the drug, his course would have been problematic.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

<sup>+</sup> Outlying values caused all chemistry data from day 7s to be discarded.

SUBJECT#618 EXPERIMENT# 21 GROUP#9 DRUG(NO mg)
PLACEBO

SYMPTOMS: 2s: "appetite not up to par"

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS: ---

**HEMATOLOGY:** 

Os: Monos 1 Low 2s: Lymphs 53 High \* 3s: Lymphs 5 2 High 7s: Het. 39.0 Low \* Eosins 0 Low 14s: WBC 11.5 High 74 Segs High Retic 2.0 High \*

CHEMISTRIES:

Scr: CO<sub>2</sub> 33 High 0s-3s: Uric H+ 2.8-3.8 Low (3x) 0s: K+ 3.5 Low 7s: Glucose 58 Low Cl 108 High

URINALYSIS: ---

CONCLUSIONS: Subject received placebo. He had no noteworthy physical findings and no symptoms of drug intolerance. His laboratory values showed a few unexplained departures from normal.

PRINCIPLE DESCRIPTION OF STATE OF CASE

NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#619 EXPERIMENT#21 GROUP#10 DRUG(NO mg) PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

 Scr-2s:
 WBC
 3.4-3.8
 Low (3x) \*

 0s:
 MCHC
 32.1
 Low \*

 2s:
 Lymphs
 48
 High

 3s:
 Segs
 38
 Low

 Eosins
 8
 High

 7s:
 MCHC
 32.1
 Low

 WBC
 4.0
 Low

 Eosins
 9
 High

Eosins 9 High

CHEMISTRIES:

0s: Trigly. 29 2s: CO<sub>2</sub> 33 3s: CO<sub>2</sub> 33 3s-14s: Creat. 0.8 Low High High Low

URINALYSIS:

**CONCLUSIONS:** Subject received placebo. Had no symptoms and no abnormal physical findings. Laboratory values had no more than the expected variations from normal.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this

<sup>----</sup>Done as scheduled, no abnormalities.

SUBJECT#620 EXPERIMENT# 21 GROUP#10 DRUG(50 mg) **PLACEBO** 

SYMPTOMS: None

ABNORMALITIES

COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

0s: MCHC

32.3

Low \*

7s: MCHC

32.2

Low

CHEMISTRIES:

2s: Uric H+ 3.7

Low

URINALYSIS:

CONCLUSIONS: Subject received 50 mg of drug without symptoms or abnormal physical findings. There is no apparent relationship between the laboratory abnormalities and the administration of the drug. No hemolysis was noted; no methemoglobinemia was seen.

----Done as scheduled, no abnormalities.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this

SUBJECT# 621 EXPERIMENT# 21 GROUP#10 DRUG(NO mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ----

**HEMATOLOGY:** 

0s-3s: MCHC 31.5-32.5 Low (3x) \*

0s: Het. 53.4 High RBC 5.9 High 14s: Plts. 349 High

CHEMISTRIES:

Ser-2s: CO<sub>2</sub> 33 High (3x) 0s-14s: Chol. 231-265 High (5x)

0s: Cl 97 Low

3s: Trigly. 276 High

URINALYSIS: ----

<u>CONCLUSIONS</u>: Subject received placebo and had no symptoms or physical findings suggestive of drug intolerance. His laboratory deviations from normal were unremarkable.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#622 EXPERIMENT#21 GROUP#10 DRUG(50 mg) **PLACEBO** 

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

**HEMATOLOGY:** 

Ser-14s:	Lymphs	50-55	High	(6x)	
Ser-2s:	-	3.8		(3x)	
0s:	MCHC	32.4	Low	•	
:	Segs	38	Low		
2s:	Het.	52.5	High		
	RBC	6.1	High		
	MCHC	32.4	Low		
3s:	Het.	53.5	High		
	Hgb.	17.6	High		
	RBC	6.3	High		
7s:	MCHC	32.0	Low		
	WBC	3.9	Low		

#### CHEMISTRIES:

2s:	co,	33	High
3s:	$\begin{array}{c} co_2 \\ \infty_2 \end{array}$	33	High
	Créat.	0.8	Low
7s:	SGOT	42	High
	SGPT	46	High

14s: WBC 4.1 Low

#### URINALYSIS:

14s: Protein 1+ NCSICS\*

CONCLUSIONS: Subject received 50 mg of drug; he had no symptoms and no positive physical findings. His laboratory findings showed a few marginal deviations from normal, none of them forming a pathophysiological pattern. Neither hemolysis nor methemogloginemia was detected.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

SUBJECT#623 EXPERIMENT#21 GROUP#11 DRUG(60 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ---

VITAL SIGNS: ----

**HEMATOLOGY:** 

0s: MCHC 31.9 Low 2s: MCHC 32.4 Low Lymphs 50 High 4 Segs 37 Low \* Retic. 2.0 High 3.7 3s: WBC Low Lymphs 58 High 26 Segs Low Eosins 8 High

CHEMISTRIES:

0s: SGOT 2 Low 3s: Glucose 110 High 7s: Glucose 115 High

URINALYSIS: ----

CONCLUSIONS: Subject received 60 mg of drug and tolerated it well, having no symptoms and no positive physical findings. His laboratory findings suggest no pathophysiological processes. No hemolysis was noted and there was no methemoglobinemia.

\*NCSICS-Not clinically significant in the context of this study.
----Done as scheduled, no abnormalities.

SUBJECT#624 EXPERIMENT# 21 GROUP#11 DRUG(60 mg)
PLACEBO

SYMPTOMS: None

ABNORMALITIES COMMENT

PHYSICAL EXAM: ----

VITAL SIGNS: ---

**HEMATOLOGY:** 

Scr-3s: MCV 99.4-100.4 High (4x) 0s: MCHC 32.1 Low \* 2s: MCHC 32.4 Low 3s: MCH 34.3 High 14s: Het. 52.4 High MCV 102 High 32.3 MCHC Low

CHEMISTRIES:

Os: Creat. 0.8 Low Ca 8.9 Low SGOT 42 High 2s: Na 139 Low High Low Low 7 s: BUN 24 High Uric H+ 3.6 Low 15s: Chol. 122 Low 3.5 Glob. High

#### URINALYSIS:

CONCLUSIONS: Subject received 60 mg of drug. He had no symptoms and no positive physical findings. His laboratory abnormalities fit no identifiable pathophysiological pattern. There was no evidence of hemolysis or methemoglobinemia.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

SUBJECT#625 EXPERIMENT#21 GROUP#11 DRUG(No mg)
PLACEBO

SYMPTOMS: None.

ABNORMALITIES COMMENT

PHYSICAL EXAM:

VITAL SIGNS:

----

**HEMATOLOGY:** 

Ser-14s: RBC 6.0-6.2 High (6x)

Ser: Het. 51.7 High WBC 4.1 Low

Retic. 2.0 High \*

2s: MCHC 31.9 Low

: Eosins 8 High

2s-7s: Hct. 50.7-53.6 High (3x)

7s: Eosin 8 High

CHEMISTRIES:

Ser: Cl 109 High

SGOT 11 Low

0s: Creat. 0.8 Low 2s: Glucose 113 High.

3s: Glucose 110 High

Trigly. 343 High SGPF 61 High

7s: SGPI 71 High

15s: Glucose 113 High

URINALYSIS: ----

CONCLUSIONS: Subject received placebo. He had no symptoms and no abnormal physical findings during the scheduled period of observation. He had triglyceride and SGPT elevations on the third day of the study, possibly related to unscheduled dietary intake. SGPT and triglycerides returned to normal by the end of the observation period. No adverse effect from study participation.

\*NCSICS-Not clinically significant in the context of this study.

----Done as scheduled, no abnormalities.

SUBJECT#626 EXPERIMENT# 21 GROUP#11 DRUG( NO mg)
PLACEBO

SYMPTOMS: Subject vomited about 1 pint of yellowish liquid about 10 minutes after ingesting capsules. for the rest of that morning, he felt lethargic. No remarkable symptoms thereafter.

#### ABNORMALITIES COMMENT

PHYSICAL EXAM: -

VITAL SIGNS: --

**HEMATOLOGY:** 

Scr-2s: Hapt. 151-165 High (3x) Scr: Retic. 2.0 High \* 0s-2s: MCHC 31.9-32.5 Low (3x) \* 2s: WBC 10.0 High 3s: Het. 51.3 High Pits. 350 High 15s: Hapt. 162 High

CHEMISTRIES:

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 0s: Glucose
 70
 Low

 3s: Glucose
 113
 High

 Na
 135
 Low

 7s: K+
 3.5
 Low

URINALYSIS: ---

CONCLUSIONS: Subject received placebo. Subject had vomiting on one occasion, cause unknown. Physical examination was negative throughout the study, laboratory studies unremarkable. No adverse effects from study participation.

<sup>\*</sup>NCSICS-Not clinically significant in the context of this study.

<sup>----</sup>Done as scheduled, no abnormalities.

# BIO - MED, Inc.

TITLE:

PHASE I SAFETY AND TOLERANCE TESTING

FOR THE PEDICULICIDE, ABATE : CUTANEOUS TOXICITY AND SENSITIVITY

PRINCIPAL INVESTIGATOR: RICHARD C. REBA, M.D.

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JAMES A. DUKE, PhD.

DONALD M. HEIN JUDY HANNAH ANGELO J. TROISI Phase I Safety and Tolerance Testing for the Pediculicide ABATE®\*: Cutaneous Toxicity and Sensitivity.

#### INTRODUCTION

ABATE®(0,0,0',0'-tetramethyl 0,0'-thiodi-p-phenylene phosphorothioate) is a potent pediculicide shown to be effective against strains of lice resistant to standard treatment. When prepared in a concentration of 2%, the drug has great potential to meet the military requirement for a raw dust-type pediculicide for the control of lice and lice-borne diseases.

The need for a new pediculicide is based on 1) the development of lice resistance to lindane and malathion, the currently registered pediculicides; 2) the short shelf life of malathion dust and; 3) the possible cancellation of lindane as an acceptable product.

#### PREVIOUS STUDIES OF ABATE:

Extensive animal toxicology studies have been done. These are presented in tabular form in the appendix. The relevant findings are as follows:

- 1. An oral LD  $_{5\,0}$  in rats of 2.03-2.33 g/kg for technical ABATE (90% pure).
- 2. A dermal LD<sub>50</sub> in rabbits of .97-1.93 g/kg for technical ABATE.  $^{\rm I}$
- 3. Reduction or inhibition of cholinesterase in animals during feeding studies.  $^{\circ}$
- 4. No evidence of skin irritation or teratogenicity in rabbits.
- 5. ABATE, applied in low doses, does not appear to be absorbed through the intact or abraded skin of rabbits.
- 6. Mutagenic (Ames <u>Salmonella</u>/microsome test) studies negative.

Testing of the substance in humans has also been reported:

1. No clinical symptoms attributable to ABATE were noted in 2000 villagers who drank water treated with ABATE (1ppm) during a continuous 19 month period. There was no significant change in red blood cell or plasma cholinesterase levels in those individuals monitored.

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Furthermore, there was "... no change in the birth or death rate, number of spontaneous abortions, or number of stillbirths. No congenital abnormalities occurred during the study, nor were there any unusual illnesses or deaths among the residents..."

- 2. 19 male volunteers were administered technical ABATE (90% pure) in oral doses of either 1) 64 mg/man/day for 4 weeks or 2) increasing doses over 4 weeks beginning at 2 mg/man/ day rising to a dose level of 256 mg/man/day for five days. No clinical symptoms or adverse reactions resulting from the administration of the compound were observed, nor was there a significant difference in red blood cell or plasma cholinesterase levels between subjects and controls.
- 3. A formulation of 2% ABATE in pyrax powder was "sleeve tested" on US Marines who were exposed to 3-6 grams for 12 hours/day, 4 days/week, for six weeks. "The treated sleeves did not cause any ill effects in the research subjects, and the results of all laboratory medical tests remained within normal ranges."

- 4. 2% ABATE in pyrax powder was applied for 48 hours to a small area of intact skin of 31 volunteers. Two weeks later, a challenge dose was applied to the same area. No evidence of irritation or sensitization was found.
- 5. 96 volunteers were treated with a single dermal application of 2 ounces of 2% ABATE in pyrax powder for 25 days. Findings were summarized as follows:

During the test the attending physician found no test subjects who manifested symptoms which could be attributed to the treatments. There were no reports skin irritation from the test subjects. The screening evaluation o f whole blood (cholinesterase) indicated no pre- or post treatment depression of ChE activity. Evaluation of LDH, SGOT, and SGPT results indicated that no changes in liver function occurred in the test groups. The SGOI results provide evidence that no damage to skeletal muscle or myocardium occurred. BUN results provide evidence that no changes in kidney function were experienced during the test.

... ABATE does not appear to be absorbed through the intact skin of man when applied in a pyrax formulation to the skin of man for 24 days and serum ChE activity is used as an indicator of absorption.

The above studies suggest that the application of small quantities of the 2% preparation of ABATE in pyrax powder to the skin of healthy subjects would be associated with very

little risk. However, no studies have been done which provide an estimate of the prevalence of cutaneous toxicity and hypersensitivity from the application of ABATE.

DESCRIPTION OF THE PROPERTY OF

We propose to study the 2% dust preparation of ABATE using healthy "free-standing" volunteers and standard skin-exposure techniques to demonstrate cutaneous toxicity and hypersensitivity. With these exposure methods, acute, direct skin toxicity and hypsersensitivity due to circulating antibody would be manifested in 2-4 hours. Closed patch testing would detect cell mediated hypersensitivity 24-48 hours after application.

#### MATERIALS AND METHODS:

Healthy male subjects between the ages of 18 and 35 years will be recruited from the Washington, D.C. metropolitan area. Subjects will be screened by personal interview, and a physical evaluation consisting of a physical examination, blood chemistries, a CBC, whole blood cholinesterase levels and a urinalysis. The following criteria must be met:

- No current or recent episode (last 5 years) of atopic dermatitis.
- 2. No current or recent episode (last 5 years) of moderate or severe allergic problems such as asthma, hay fever, drug or food allergy.
- 3. No current contact dermatitis of any kind.
- 4. No current use of antihistamines or immunosuppresants.
- 5. No moderate to severe dermatophytosis.
- 6. By his own declaration, the subject must be in good health.
- 7. A physical evaluation showing good general health and the absence of any medical conditions which would increase the risk of participation for that subject or compromise the design of the study.

A sufficient number of subjects will be recruited until either 200 have been tested or until 10 instances of direct sensitivity have been identified 10 "statistical considerations"). Subjects who are tested by exposure for toxicity and antibody-mediated be positive hypersensistivity and found to participate further as subjects for closed-patch testing.

Potential study subjects will be presented with a written explanation of the study (see appendix) and will have an explicit opportunity to ask questions about the study and their role in it. All subjects must sign the informed consent document (see appendix) before they will be allowed to participate.

Two types of skin testing will be sequentially performed:

1. Immediate reactions studies: Direct application studies for immediate toxicity and antibody mediated hypersensitivity and 2. Delayed reaction studies: Closed patch testing group for cell mediated hypersensitivity.

#### **PROCEDURES**

This will be a single blind design, with a control substance (vehicle without active pediculicide) and 2% ABATE applied to orthogonal areas of the ventral surface of the forearm. Qualifying subjects will report to the clinical facility on day 1 for their assigned starting date(see schematic). subject will have a 3X3 cm area of the ventral surface of each forearm marked in a water-resistant ink with a felt-tip pen. The test substances will be delivered by metal scoops to measure out 1 gram of each test substance. substance will be spread over the test area, then removed by dry brushing 5 minutes after application (brushing will be in plastic bags to minimize air contamination). test substances will be reapplied in a like manner on study day 3 as on day 1, and the sites will be examined 5 minutes after application, before hours reapplication and 7 days after the initial application (see study schematic).

Any subject showing a positive reaction (see appendix) will be referred to the consulting dermatologist for evaluation and any required treatment. Such reactions will be carefully described and photographed.

Subjects not showing a positive reaction after 2 hours will be entered into the Delayed sensitivity phase of the study which is described below.

Subjects from the direct application study will be participants in the closed patch testing except for individuals who react positively in the Immediate Reaction phase of the study who will be excluded.

A placebo and an active substance will be applied simultaneously, without disclosing their identity to the subject.

This group of subjects will have the test substances applied in pairs to the lumbar area of the skin of the back (one each to either side of the spine) in standard aluminum testing discs containing 1 gm of the test substance (placebo in one, control in the other).

These discs will remain in place for 48 hours, held by "scanpor" tape. Subjects will be examined at the removal of the discs and again at 24 hours and 5 days after removal.

Subjects without positive reactions will have the procedure repeated in 30 days.\*

Study Schematic: Skin testing is outlined in the schematic below:

STUDY DAYS	SD1	SD3	SD4	SD8	SD30	SD32	SD33	SD37	
DIRECT APPLIC	. x	X			x	X			
DISC APPLIC.	X				x				
DISC REMOVAL		X		•		X			
SITE EXAM	X	X	x	X	x	X	X	X	
LABORATORY \$		X+		X		X+		X	

Blood examinations include a) a CBC with differential count, platelet count, RBC indices and reticulocyte count b) chemistries glucose, BUN, creatinine. potassium, chloride, carbon dioxide, uric acid, calcium, albumin, globulin, phosphorous protein. cholesterol, triglycerides, alkaline phosphatase, SGPT, and total bilirubin c) whole blood cholinesterase levels will be performed in screening and on days shown above (X+). Also, a complete urinalysis will be done at the time of each clinical blood test.

Applications of the test substances will be made in a manner that will minimize air contamination. Particular care will be taken to insure that personnel administering the test substances are not placed at risk. Cholinesterase levels of blood and serum will be measured weekly on techinical personnel.

Forms for the orderly collection of data have been designed. Samples are included in the appendix. Registered nurses will apply the test substances, with a physician in attendance at all times. All evaluations of dermal reactions will be performed by a physician.

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Subjects will be advised of the possibility of delayed local or systemic reactions, and will be advised to seek medical assistance promptly (at Bio-Med, Inc. or elsewhere, depending upon the circumstances) should such reactions occur.

<sup>\*</sup>Direct application and closed patch testing will be repeated at 30 days to detect induced hypersensitivity to ABATE.

The written instructions that will be given to each subject describing the care of the exposure site and management of skin reactions are included in the appendix.

At the conclusion of each subject's participation in the study, the physical evaluation will be repeated (P.E., Blood chemistries, CBC, UA). Any significant abnormalities will be cause for follow-up until normalcy occurs or proper medical disposition has been made.

#### ANALYSIS AND INTERPRETATION OF DATA

All reactions will be noted as positive or negative. The severity of positive reactions will be graded from "?" to "+++" (see appendix). These reactions will be tabulated for each subject and analyzed as described below.

Using the occurrence of toxicity and hypersensitivity in our subject population, we will make estimates of the frequency of those phenomena and we will wish to know the confidence limits (CL) of those estimates. We will especially be interested in calculating the confidence limits in series of moderate sizes (100-500) where the observed frequency was zero.

Under the conditions of an observed frequency of zero, the upper 95% CL may be calculated as:

$$=1-e^{\ln(1-CL)/N}$$

From that formulation, this Table may be derived:

EXAMPLES OF 95%CL IN SAMPLES WITH OBSERVED "ZERO"FREQUENCY

SAMPLE	SIZE(N)	UPPER	95%CL	DOES	NOT	EXCEED
100			3 .	.00%		
200			1.	50%		
300			1.	. 00%		
400			0.	75%		

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The price for increasing assurance about the prevalence of toxicity and hypersensitivity in the general population is apparent. It must be noted that these estimates are based upon assumptions of optimal conditions in the conduct of the experiment, and therefore significant time effects, for example, will substantially increase the required number of subjects.

Should it become necessary to do so, the Principal Investigator, acting with the concurrence of the COTR, may enroll more than 200 subjects in each of the treatment groups.

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TEST	RESULTS	INTERPRETATION
TECHNICAL ABATE (90% pure)		
ORAL LD <sub>50</sub> Rats	1 * Male - 2.03(1.26-3.2)g/kg Female - 2.33(1.66-3.27)g/kg	4(App.A) Moderately toxic substance
Mice	4.7(4.1-5.4)g/kg	2 Consistent with other toxicity data
DERMAL LD <sub>50</sub> Rabbits: 24 hour contact with shaved skin	1 Male - 1.93(1.33-2.79)g/kg Female97(.57-1.65)g/kg	4(App.A) Moderately toxic
PRIMARY IRRITATION Skin-Rabbits: 93.7% pure compound	No irritation of intact or abraded skin	2 USAEHA PIEP Category I (unrestricted use for application to human skin)
Eye-(Rabbits?) .2 ml 93.7%	Slight irritating reaction at 24 hours; eyes normal at 48 hours	2 USAEHA PIEP Category A (unrestricted use)
Eye-Rabbits: .1 ml 90% pure compound	l Not irritating	
SKIN SENSITIZA- TION Guinea pigs	Challenge dose produces no response greater than "sensitizing" doses	
SUBACUTE ORAL TOXICITY: TECHNICAL ABATE Rats: 10 mg/ kg/day for 44 days	31% inhibition or reduced cholinesterase (ChE) after 14 days; 47% ChE inhibition after 11 days; symptoms of organophosphate poisoning observed	2 Compound may cause a decrease in chol- inesterase activity

TEST	RESULTS	INTERPRETATION
Rats: 100 mg/ kg/day for 44 days	64% inhibition of red cell ChE after 3 days; 87% ChE in- hibition after 11 days; symptoms of organophosphate poisoning observed	Compound may cause symptoms of in-creased cholinergicactivity.
Rabbits: 10 mg/kg/day for 44 days	26% inhibition of red cell ChE after 7 days; 47% inhi- bition of ChE after 35 days; no symptoms of organophos- phate poisoning observed	Compound may cause decrease in ChE activity.
Rabbits: 100 mg/kg/day for 5 days	38% of animals died; 50% of all rabbits showed necrosis. of the liver	Compound may cause diffuse or focal necrosis.
Rats: 2 ppm/day for 92 days	No treatment related effects	
Rats: 6 ppm/day for 92 days	Males:Borderline inhibition of red blood cell (RBC) ChE	
Rats: 18 ppm/day for 92 days	Inhibition of RBC ChE, borderline brain ChE inhibition; RBC ChE returned to normal within 2 weeks post treatment	
Rats: 54 ppm/day for 92 days	Inhibition of RBC, plasma and brain ChE; 2 weeks post treatment RBC and plasma ChE in males still depressed	
Rats: 350 ppm/day for 86 days	Slight decrease in total weight gain of females relative to controls; marked RBC, plasma and brain ChE inhibition; significant decrease in liver weight in males	
Dogs: 2,6, or 18 ppm/day for 90 days	No treatment related effects	

TEST	RESULTS	INTERPRETATION
Dogs: 700 ppm/day for 1 week, then 500 ppm/ day for 11 weeks	I Initial "cholinergic signs", marked RBC, plasma and brain ChE inhibition; no gross or microscopic pathology	
DERMAL APPLICA- TION: TECHNICAL ABATE Rats: (intact/abraded, skin) 12 mg/kg/day ABATE in aque- ous emulsion 5 days/wk for 3 weeks	No significant treatment related effects (ChE not monitored)	
Rats: (intact/abraded skin) 60 mg/kg/day as above	Male - significantly lower mean weight gain relative to controls Female - increase in liver and kidney weight, no gross or histopathology (ChE not monitored)	
90 DAY WEAR TEST: RABBITS Continuous wear with reapplica- tions 1/week	·	
TECHNICAL ABATE (86.2%) with .5 ml. acetone (85.7 mg/kg) intact skin	Isolated changes in serum amylase, ChE and BUN significant at .01 level relative to cage controls	
2% ABATE/pyrax powder (4.3 g powder/kg) intact skin	No significant skin irritation; no significant differerence in hematology, blood chemistries, pathology, weight gain or organ/body weight ratios relative to cage controls	ABATE, at the dosa- ges applied, does not appear to be absorbed through
2% ABATE/pyrax powder with .1 ml "artificial sweat" (4.3 g powder/k;) intact skin	No physiologically signifi- cant changes noted	the intact or abraded skin of rabbits when ChE is used as an index of absorption.

TEST	RESULTS	INTERPRETATION
90 DAY WEAR TEST, Continued 2% ABATE/pyrax powder(as above) abraded skin	Isolated changes in BUN and serum amylase levels significant at .01 level relative to cage controls.	as above
EMBRYOTOXICITY/ TERATOGENICITY Pregnant rabbits dosed with formu- lations of ABATE days 6-18 of preg- nancy		-
TECHNICAL ABATE suspension in 10% gum Acacia	3	
Oral: 32 mg/kg/day	Significant decrease in RBC ChE; slight decrease in gestation indices(litters born alive/pregnancies);33% doe mortality; no gross pathology	
Dermal: 164 mg/kg/day	Significant decrease in RBC, plasma ChE; slight decrease in gestation indices; decrease implantations; embryotoxic (decrease live fetuses, total fetuses, and fetal weight). 40% doe mortality; no gross pathology	No teratological hazard in rabbits at compound levels which produce toxi effects.
10% ABATE/pyrax powder		3
Dermal:163 mg ABATE/kg/day	Significant decrease RBC ChE; decrease in fertility indices no gross pathology	No teratological hazard
27 ABATE/pyrax powder		
Dermal:16.3 mg ABATE/kg/day	No treatment related effects	

TEST	RESULTS	INTERPRETATION
SUCCESSIVE GENERATION FEEDING	1	
Rats: 25 or 125 ppm ABATE/ day for 3 generations	No treatment related effects on lactation or reproduction	
SYNERGISM		
Rats: oral 1/8 LD <sub>50</sub> ABATE +1/8 LD <sub>50</sub> mala- thion	All test animals died	Results indicate a four fold potentiation when malathion and ABATE are given together.

<sup>\*</sup> References: same as those cited in text

### PATCH TESTING READING AND INTERPRETATION

Reading the Test Results: At each test reading, it is traditional to note the result as negative or positive, and grade the positive results on a quantitive scale. The International Contact Dermatitis Research Group has recommended a 1+ representing erythema and edema, 2+ showing vesicles in addition, and 3+ being a very severe reaction. Weak and questionable reactions are recorded by a question mark.

#### Interpretation Key: Cutaneous Reaction

doubtful reaction; faint macular erythema only
weak (non-vesicular) positive reaction; erythema, infiltration, possibly papules

tration, possibly papules

tion, papules, vesicles

extreme positive reaction; bullous reaction
negative reaction

At each examination patients will be asked if they have irritation of the skin, increased sensitivity, mild or severe itching or burning.

The skin will be stroked lightly to determine Hyperesthesia.

\* Provided by Consulting Dermatologist

# ABATE PROTOCOL INDIVIDUAL DATA COLLECTION WORK SHEET

Subject's Name:		<del></del>	<u> </u>	
Accession Number:		_		
Portion of Study:	OPEN P	ATCH	CLOSED	PATCH
Day of Study:		_		
Reason for visit:			<del>,</del>	
Procedures:		· · · · · · · · · · · · · · · · · · ·		
Examinations:				
Instruction and Disposit				

# EXPLANATION FOR POTENTIAL SUBJECTS EXPERIMENT NUMBER 23

ABATE®\* : Cutaneous Toxicity and Sensitivity

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#### Gentlemen:

The study now being considered is designed to measure human sensitivity to an insecticide called ABATE® when applied as a powder to the skin. ABATE is being considered by the U.S. Army as an agent to control the spread of lice, which can carry diseases such as trench fever, relapsing fever, and epidemic typhus. Historically, the possible spread of louseborne diseases has threatened the health of many fighting forces, including those of the United States, as seen in World War II and in the Korean War.

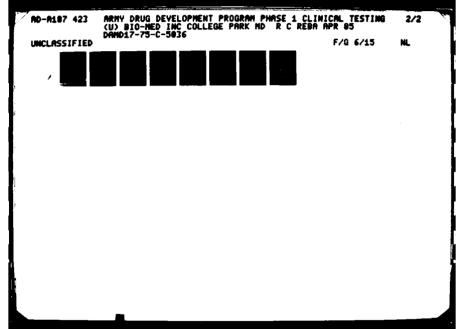
ABATE is being considered as an agent to control lice for several reasons:

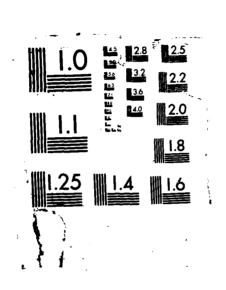
- 1) Lice are developing resistance to the agents in current use.
- 2) ABATE has demonstrated effectiveness in killing lice.
- 3) ABATE has a longer shelf-life than current agents;
- 4) ABATE is considered by the Environmental Protection
  Agency to be the least toxic of availate organophosphates.

While ABATE is currently registered with the E.P.A. for control of several species of insects, its use as an age applied to humans to kill body lice is still under the gation. As a member of the family of organophosphate kills lice by interfering with the normal activities insect's nervous system. Normally, a check acetylcholine, which plays a role in the tracking impulse between nerve fibers, is nextralized called cholinesterase. This neutralized fiber to return to its non-transmitt to transmit the next impulse. ABATE cholinesterase, preventing a acetylcholine, resulting in the function properly.

As intended for use on him powder consisting of 2% Astronomedium, which is composed imately 80%) and Astronomedium tests of the state for periods up to a ferences between

<sup>\*</sup>Registere 1 110





cholinesterase levels, blood cell counts, weight gain, skin irritation, and health of internal organs. Other studies in animals indicate that ABATE in the same formulation would not present a toxic hazard to man when applied once to the skin, and that absorption would be expected to be less than 3% of the applied dose. These studies indicate that the majority of the chemical would be excreted from the body within 24 hours through the urine, with elimination essentially complete after 3 days. The tests provided no evidence that the compound was retained in the animals generally or in specific areas.

ABATE in the 2% formulation has been tested in humans for possible ill effects. In a 19-month study in Puerto Rico, the people of a village of about 2,000 drank water treated with ABATE, consuming approximately 1 mg/man/day, with no clinical symptoms attributable to the insecticide observed. In another study, 28 male volunteers were given either a dose of 256 mg/man/day for 5 days, or a dose of 64 mg/man/day for 28 days without developing clinical symptoms or side effects attributable to ABATE. Levels of cholinesterase in red cells or plasma were not affected adversely.

ABATE has also been tested in the 2% formulation as a powder applied to the skin of human subjects. When applied to 1 square inch of the arm of 31 men for 48 hours, there was no evidence that the skin had developed sensitivity to ABATE. In a separate study, subjects wore clothing treated with 3 to 6 grams of ABATE for 12 hours/day, 4 days/week, for 6 weeks. There were no ill effects on the subjects, and the results of all laboratory medical tests remained within normal range.

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These studies suggest that there would be very little risk in applying small quantities of ABATE 2% to the skin of healthy human subjects. The study currently being undertaken is designed to see if ABATE 2% causes irritation when applied directly to the skin, or if it causes the skin to become sensitized to future applications. There will be two separate test periods in this study: I) The Immediate Reaction Testing period and II) The Delayed Reaction or closed patch testing period.

#### I. The Immediate Reaction Testing period

Those of you who qualify will report to the clinical facility on Study Day 1, a Monday, for your assigned sub-group. Each of you will have an area approximately 1 inch square marked with water-resistant ink on the inside of both your left and right forearm. One gram of ABATE 2% will be applied to one arm, while 1 gram of pyrax powder with no ABATE will be applied to the other. To help ensure that you will treat the application sites without bias, you will not be told which site is receiving which treatment. After 5

minutes, the powders will be dusted off and the sites examined for any skin irritation, known as a positive reaction. Those participants who experience positive reactions will be referred to the consulting dermatologist and will not participate in any further testing.

Those who show no reaction to the application two hours after application of the substance will enter into the delayed reaction study period.

#### II. Delayed Sensitivity Period:

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Those of you referred on for Delayed Sensitivity testing will have two perforated discs, one containing the drug ABATE and the other containing placebo, applied to each side of your lower back. You must keep those discs in place and dry for the next 48 hours. Two days after application (study day 3), you will return to the clinical facility where the discs will be removed and the underlying skin will examined. On that same visit, the dry powder will once more be applied to the skin of your forearm for 5 minutes, and you will be observed for two hours for reactions. You will return the next day for site examination. You will return one week (7 full days) after the first application of the test substance for evaluation of the test sites on both your tests (blood tests forearm and back. Laboratory urinalysis) will be done on this day as well. Thirty days after your initial test application, the entire testing procedure will be repeated. The test powder will be applied to your forearm and the application sites examined at five minutes and again at two hours after application. If there is no reaction, the perforated discs will be applied. You will return 48 hours later (study day 32) for disc removal, reapplication of the test powder to your forearm, examination of the test sites as done before. You will return the next day for site examination. Your final visit will be on study day 37 when you will have a complete physical evaluation including laboratory tests physical examination. If your evaluation is normal you will dismissed from the study. In the event abnormality, you will be carefully followed until normalcy is re-established or proper medical disposition has been made.

If there is a positive reaction at any time, you will be referred to a consulting dermatologist for evaluation and treatment if necessary, and you will not participate in any further testing. Photographs of the sites will be taken in these cases.

#### Instructions for the Care of the Sites and Possible Reaction

- 1) During the periods of testing (study Days 1 through 8 and 30 through 37), keep the areas of application dry. Do not wash them.
- 2) Do not apply ointments, lotions, powders or sprays to the areas during the test periods.
- 3) If you experience a reaction during the day, and you are not scheduled to come in to BIO-MED that day, call and arrange a visit. If you experience a reaction during the night or over the weekend which you feel requires medical attention, call Dr. Kevin G. Barry at 561-4992.
- 4) The possible skin reactions are similar to those of a localized sunburn. These may vary from redness at the site of application to blistering.

The study is outlined in the schematic below:

DAY OF STUDY	SD1	SD3	SD4	SD8	SD30	SD32	SD33	SD37
POWDER APPLIC	X	X			x	X		•
DISC APPLIC.	X				X			
DISC REMOV		X				X		
SITE EXAM	X	X	X	X	X	X	X	Χ .
LABORATORY \$		X		X		X		X

§ Laboratory will include complete blood testing and urinalysis. Blood will be obtained by venipuncture.

You should know the policies and procedures followed at BIO-MED, Inc. to minimize the risk to your health and well-being. They are:

- 1. All procedures are conducted by a physician licensed in Maryland, or by a registered nurse or technician directly under the physician's supervision.
- 2. Each study to be conducted at BIO-MED, Inc. is reviewed by other agencies for compliance with Department of Health and Human Services Guidelines regarding subject participation in medical experiments. Those agencies are:
  - a. The Food and Drug Administration.
    This arm of the Federal Government reviews study proposals for investigational new drugs.
  - b. The Regulatory Agencies of the sponsoring bodies.
    In the case of studies sponsored by the U.S. Army, studies must be approved by the Human Use Committee of the Office of the Surgeon General of the U.S. Army.

- c. The Institutional Review Board of BIO-MED, Inc.
  This board in made up of informed citizens from the local community. The board reviews each proposed study to see that the risks to the subjects are minimal, precautions are taken to avoid risk when possible, and that risks are fully disclosed to the subjects. The members of this board occasionally visit the clinical facility to inspect the conduct of the study.
- 3. To further insure your personal protection the following standard procedures are established:
  - a. Should you require emergency medical treatment, you will be taken to nearby Doctor's Hospital of Prince George's County.
  - b. As a temporary employee of BIO-MED, Inc. you are protected by Workmen's Compensation for disability resulting by reason of your employment.
  - -c. At the conclusion of your participation in the study, you will have a complete physical evaluation including a physical examination, blood tests and urinalysis. Any significant abnormalities will be followed up until normalcy is reestablished or proper medical disposition has been made.

After a member of the investigating team has explained the nature, design and risks of the study, and is satisfied that you understand both the study and the written informed consent form, you will be permitted to sign the form. No subject may participate without a signed consent. By signing the informed consent, you signify that the study has been explained to you with regard to its risks and requirements, and that you wish to participate.

It should be clear to you that your participation in this study is of no medical benefit to you personally. The benefit, rather, is to others who live in parts of the world where louse infestation is a serious problem, including Americans, both civilian and military, who may be exposed to it while traveling in these areas. Your participation must be entirely voluntary with full knowledge of the personal risks and general benefits involved. Furthermore, you retain the right to withdraw your consent at any time without fear of any consequences.

# SUBJECT AGREEMENT CONSENT TO PARTICIPATE AS A STUDY SUBJECT

I, hereby give my informed consent to participate as a study subject in the study entitled "ABATE®: Cutaneous Toxicity
a study subject in the study entitled "ABATE": Cutaneous Toxicity
and Sensitivity."
The implications of my voluntary participation; the nature,
duration and purpose; and the methods by which it is to be
conducted and the inconveniences and hazards which may reasonably
he expected have been explained to me by Dr
be expected have been explained to me by Dr, and are set forth in the document titled "Explanation for Potential
Subjects, Experiment Number : ABATE®: Cutaneous Toxicity and
Sensitivity.", which I have initialed.
I understand that unexpected reactions may occur with any drug. The
known discomforts and potential risks of participation as a subject
in this study have been explained to me and I freely and
voluntarily accept them. I understand that I will receive no direct
therapeutic benefit from participation in the study.
I understand that as a temporary employee of BIO-MED, Inc.,
Workmen's Compensation is provided for any disability resulting by
reason of my position as employee.
reason of my position as employee.
All questions and inquiries I have made regarding the study have
been answered to my satisfaction and I understand that I have the
right to ask questions concerning the study at any time and have
them answered to my satisfaction. Further, I understand I am free
to withdraw, without prejudice, my consent and participation from
the project at any time; however, I may be requested to undergo
further examinations if, in the opinion of the attending physician,
such examinations are necessary for my health and well-being.
I consent to the taking and publication of any obstantion in the
I consent to the taking and publication of any photographs in the course of the study for the purpose of advancing medical science,
provided that my identity will remain confidential.
provided that my recitity with remain confidential.
I certify that I have read and understand the above consent and
that the explanations therein were made to me and that all
inapplicable paragraphs, if any, were stricken before I signed.
Date Signature Investigator Certification
pare pikuarate investibator Cartification
Address
Witness
<u> </u>
REAFFIRMATION OF CONSENT:
Date Signature Witness

## BIO - MED, Inc.

TO: Subjects in the "ABATE" study at BIO-MED, Inc.

INSTRUCTIONS FOR CARE OF APPLICATION SITES AND POSSIBLE REACTIONS

You have had a substance called "ABATE", a specialized insecticide, applied to your skin.

The areas of application must be kept <u>clean</u> and <u>dry</u> during the testing period (study days 1 through 8 and 30 through 37). Do NOT wash the application sites during this time.

Do NOT apply any ointments, lotions, powders or sprays to the areas during the testing period.

If a disc containing powder has been applied, you must keep that site clean and dry until the disc is removed.

If you have itching or discomfort at the site where ABATE has been applied, please call BIO-MED, Inc. for instructions or return directly to the clinic. If you experience a reaction during the night or over the weekend which you feel requires medical attention, call your family physician or Dr. Kevin G. Barry at 561-4992.

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Possible skin reactions: these may vary from redness at the site of application to blistering. The possible changes are similar to those of a localized sunburn.

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